

MEDFORD PUBLIC SCHOOLS
Application for Financial Assistance

PLEASE PRINT CLEARLY

Application Date: ____/____/____

1. CHILD INFORMATION

Child's Name _____

Child's anticipated program placement: Brooks Missituk McGlynn Roberts

2. FAMILY / HOUSEHOLD INFORMATION

Parent/Guardian #1

Name _____ Relationship to Child _____

Address _____ City/State/Zip _____

Cell # _____ Work # _____

Home #: _____ Email _____

Income Type	Monthly Amt.	Copy Provided?	Income Type	Monthly Amt.	Copy Provided?
Wages, Salaries and Tips	\$	Y N 4 consecutive paystubs	Social Security Compensation	\$	Y N
Unemployment Compensations	\$	Y N	Child Support	\$	Y N
Disability Income	\$	Y N	Retirement Income	\$	Y N
Food Stamps	\$	Y N	Alimony	\$	Y N
Housing Allowance	\$	Y N	Other Government Payments or Stipends	\$	Y N

Also please provide most recent IRS1040

Parent/Guardian #2

Living in same household with child? ☐ Yes ☐ No

Name _____ Relationship to Child _____

Address _____ City/State/Zip _____

Cell # _____ Work # _____

Home #: _____ Email _____

Please complete both sides of form

Income Type	Monthly Amt.	Copy Provided?	Income Type	Monthly Amt.	Copy Provided?
Wages, Salaries and Tips	\$	Y N 4 consecutive pay stubs	Social Security Compensation	\$	Y N
Unemployment Compensations	\$	Y N	Child Support	\$	Y N
Disability Income	\$	Y N	Retirement Income	\$	Y N
Food Stamps	\$	Y N	Alimony	\$	Y N
Housing Allowance	\$	Y N	Other Government Payments or Stipends	\$	Y N

Also please provide most recent IRS1040

Other Adults in Household

Name	Relationship

Other Children in Household

List names and ages of siblings, oldest to youngest.

Name:	Date of birth:	Age in years:	Name of school it attending

I verify all of the above information is accurate:

Signature

Print name

Please return this form with all verifying income documentation including:

Page one from your US 1040 Income Tax Form, 4 consecutive pay stubs for each working parent, and any other relevant financial documentation to:

**Roberts Elementary School
MEEP Office, Denise Rogier
35 Court Street
Medford, MA 02155
781-393-2155 x4218**

MEEPpreschool@medford.k12.ma.us

A decision will be reached on your financial assistance within 10 business days after receiving all necessary qualifying information.