



# RENAISSANCE ACADEMY STUDENT FINACAL AID FORM

**2024-2025**

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## APPLICANT INFORMATION

Please print clearly in black ink.

Student applicant name:

Last name (surname/family name) \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Student date of birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Current grade: \_\_\_\_\_ Applying for grade: \_\_\_\_\_

Student country of birth \_\_\_\_\_ Student country(ies) of citizenship \_\_\_\_\_

Student's passport number:

Student-applicant home/permanent address: \_\_\_\_\_ Number and Street \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Student-applicant mailing address and phone number (if different from above): \_\_\_\_\_ Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Valid phone number (include country and city codes) \_\_\_\_\_

Student email address \_\_\_\_\_

## PARENT OR GUARDIAN INFORMATION

The student-applicant resides with:  Mother  Father  Stepmother  Stepfather  Grandparent

Other (explain) \_\_\_\_\_

Parents' current marital status  Married  Separated/Divorced  Other (explain) \_\_\_\_\_

Does any parent file a U.S. Federal tax return?  Yes  No

### PARENT/GUARDIAN 1 NAME:

Last name (surname/family name) \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Age: \_\_\_\_\_ Relationship to student-applicant \_\_\_\_\_

Email address \_\_\_\_\_

Home address (if different from applicant) : \_\_\_\_\_ Number and Street \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Occupation/Title \_\_\_\_\_

Employer \_\_\_\_\_

Number of years with employer \_\_\_\_\_  Full time  Part time

**PARENT/GUARDIAN 2 NAME**

Last name (surname/family name) \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Age: \_\_\_\_\_ Relationship to student-applicant \_\_\_\_\_

Email address \_\_\_\_\_

Home address (if different from applicant) \_\_\_\_\_

Occupation/Title \_\_\_\_\_

Employer \_\_\_\_\_

Number of years with employer \_\_\_\_\_

Full time  Part time

**FINANCIAL INFORMATION**

List your family's annual income for the current calendar year and estimated for next year:

| SOURCE OF INCOME              | THIS YEAR  | NEXT YEAR  |
|-------------------------------|------------|------------|
| Parent 1 salary/wages         | US\$ _____ | US\$ _____ |
| Parent 2 salary/wages         | US\$ _____ | US\$ _____ |
| Other income (please explain) | US\$ _____ | US\$ _____ |
| ANNUAL EXPENSES               | US\$ _____ | US\$ _____ |
| Other _____                   | US\$ _____ | US\$ _____ |

Briefly describe your family financial circumstance and reason for the financial aid. Please attach and include the parent's income tax return, investments and assets (real estate, bank statements, stock/bonds, etc...) and any monthly expenses that should be considered (mortgage, rent, car payments, etc...) .

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much can your family contribute toward the student applicant's educational expenses? US\$ \_\_\_\_\_

Requested Financial Aid Amount: \$ \_\_\_\_\_

**VERIFICATION**

I declare that the information reported on this form is, to the best of my knowledge and belief, true, correct, and complete. I authorize you to request and receive such information and release Renaissance Academy from all liability that might result from making such investigation. All information on this application will be held in the strictest of confidence by Renaissance Academy.

Signature of Parent/Guardian 1 \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent/Guardian 2 \_\_\_\_\_

Date \_\_\_\_\_

Please return this form with your registration forms to Renaissance Academy Administration

**For Office Use Only**

Amount Awarded: \_\_\_\_\_ Date Awarded: \_\_\_\_\_ Initial: \_\_\_\_\_