

Family Tuition Relief Request Form



Please list your children who attend Northshire Day School:

Child's Name _____ Date of Birth _____
Classroom _____

Child's Name _____ Date of Birth _____
Classroom _____

Household Earner 1

Name _____
Home Address _____

Phone _____
Occupation _____
Employer _____
Income _____

Household Earner 2

Name _____
Home Address _____

Phone _____
Occupation _____
Employer _____
Income _____

NDS requires income verification (pay stubs, W2, or your recent tax return) in order to process this request. Please include when you submit this form.

Please list any additional income (interest, rents, grants, aid, support, etc.):

How many people are dependent upon your family income: _____

Name and age of siblings: Name: _____ Age: _____
Name: _____ Age: _____
Name: _____ Age: _____

Please list any other sources of tuition support and estimated amount (i.e. Vermont Subsidy, Pre-K partnership tuition, etc.):

Please list any unusual circumstances that make financial assistance necessary: _____

What is your current weekly tuition payment? _____

What would be an affordable weekly tuition payment? _____

Signature: _____ Date: _____
Signature: _____ Date: _____

Growing a Strong Community of Happy & Healthy Children for Over 50 Years

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