Harpswell Community Nursery School

Form 9

Tuition Assistance Application

Child's Name:	Date of Birth:
Please submit your application to the attention	of the Director , in person, or by mail at the address below.
Overview:	
gifts and events. Our biggest event is Rul	ir programs. We raise funds through our annual appeal, n By the Bay 5k, held the Saturday of Mother's Day Il Field on the shore of Middle Bay in Harpswell. We te.
Eligibility:	
	eir child's tuition. We offer a sliding-fee scale based on I qualify for some percentage of tuition assistance. Our ies in attending one core class program.
Required Information:	
We ask that you submit proof of income for t	the parents and/or guardian of the child.
Please indicate the total number of depende	nts in your household
I've included a copy of my/our most recent V	V-2
Optional Additional Information:	
Are there any special circumstances that you	u would like to make us aware of?
Our sliding scale for assistance is a general feel your family can realistically contribute?	tool for assessing need. What portion of tuition do you Please note this as per month or per pay period.
Signature of parent/guardian	Date
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