



CEDAR
INTERNATIONAL
SCHOOL
BRITISH VIRGIN ISLANDS

Financial Aid Application Form

Please complete this form in its entirety and return to Cedar International School.

Student's Name _____ Date of Birth ___ / ___ / ____ Grade _____

Student's Name _____ Date of Birth ___ / ___ / ____ Grade _____

Student's Name _____ Date of Birth ___ / ___ / ____ Grade _____

Mother / Guardian Name _____ Email _____

Contact telephone (home) _____ (cell) _____

Occupation _____ Present Income _____

Employer _____ For how long? _____

Employer's Address _____

Father / Guardian Name _____ Email _____

Contact telephone (home) _____ (cell) _____

Occupation _____ Present Income _____

Employer _____ For how long? _____

Employer's Address _____

Applicant(s) live with (check all that apply):

Father: Mother: Stepfather: Stepmother: Other: (please specify below)

Name _____ Relationship _____

Address _____

Are the applicant's parents (check all that apply):

Married : Separated: Divorced: Single: Other:

Father deceased: Mother deceased:

If divorced or separated do you receive support from the other spouse? Y N Amount \$ _____ /month

Is Parent / Guardian unable to work? Please specify reason _____

Who is financially responsible for the student's tuition? _____

The information below applies to both parents unless the parents are divorced. If divorced, it applies to the financially responsible parent or guardian.

Is housing subsidised? Y N Amount \$ _____ Monthly rent or mortgage \$ _____

List outstanding debts (car loans, bank loans etc.)

Company _____ Balance \$ _____ Monthly payment \$ _____

Company _____ Balance \$ _____ Monthly payment \$ _____

Company _____ Balance \$ _____ Monthly payment \$ _____

Company _____ Balance \$ _____ Monthly payment \$ _____

Please list any other source of income other than salary listed on the front (rentals, interest, dividends etc)

\$ _____ Source of income _____

\$ _____ Source of income _____

\$ _____ Source of income _____

\$ _____ Source of income _____

Monthly Commitments (please list all your monthly commitments below):

- Divorce Settlement \$ _____
- Rent / Mortgage \$ _____
- Electricity \$ _____
- Telephone \$ _____
- Cable \$ _____
- Tuition \$ _____
- Other Tuition \$ _____
- Groceries \$ _____
- Car expenses \$ _____
- Medical expenses \$ _____
- Debt Service expenses \$ _____
- Internet \$ _____
- Other \$ _____

Total monthly commitments \$ _____

Please enclose current payslips for any and all positions of employment held by each employed parent of the household and photocopy evidence of either rent or mortgage payment.

I hereby declare that all the forgoing statements are true and accurate and reflect the current financial status of the family situation.

Signature: _____ Date: _____

Please use this space to describe any extenuating circumstances you want us to consider.



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