

Financial Assistance Application Form

APPLICATION WILL NOT BE PROCESSED WITHOUT REQUIRED DOCUMENTATION

Failure to provide proof of all income will result in a delay in processing this request.

DO NOT SEND ORIGINALS; they cannot be returned. Copies can be made for you at the Lincoln Public Schools Business Office.

All documentation is treated confidentially and details are not shared with any other offices or departments.

Your first name and initial	Last Name	Home Phone	Address
Other Parent/Guardian first name	Last Name	Home Phone	Address

1a Check off Adults in Households:

Yourself Spouse
 Other Name _____ Relationship _____
 Other Name _____ Relationship _____
 Other Name _____ Relationship _____

1b List all Dependents living with you:

First Name	Last Name	Relationship to you	2023/24 Grade	2023/24 School	Check if filing for fee assistance for:			
					Bus	Athletic	Instrument Lessons	Other*

*Other would include mandatory school field trips and other school related fees; not events or overnight travel when optional.

Enter total adults claimed on tax return:

Total number of dependents claimed by you on your tax return listed in 1b above:

Total number claimed by you on your tax return listed in 1a and 1b above:

Note: This line should tie to line 6d, Form 1040, of most recent tax return.



2a Yearly Income supporting child(ren):

Required Documentation	Check if Included	Reason Not Included (attach explanation if necessary)
1. Internal Revenue Service 1040 form page 1 & 2 of all adults residing in the household (Transcript also permissible)		
2. DFAS Military Leave and Earnings Statement		
3. Supplemental Security Income (SSI) and Disability Income		
4. Unemployment Compensation and Severance Pay		
5. Alimony and Child Support Agreements		
6. Transitional Assistance Letters and Benefits: 781-388-7375 or 1-8000-249-2007		
7. Housing Authority Verification/Calculation Worksheet		
8. Section 8 Housing Voucher		
9. Documentation for Foster Child (Foster Children are handled as one household and are not included as a member of the family in which they are residing or in the household income of the custodial parent)		
10. Non-Custodial Parent income is considered when one parent receives the tax deduction of the dependent and there is no record of child support.		

An adult household member must sign the application.

I certify (promise) that all information included with this application is true and that all income is reported. I understand that the school may get federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my children may lose benefits, and I may be prosecuted.

Sign here: _____ Print name: _____

Please print out and complete the front **and back** of this form and mail to Mary Ellen Normen, Administrator for Business and Finance, Lincoln Public Schools, Ballfield Rd., Lincoln, MA 01773

Financial Assistance Verification Form

I, _____ am applying for Financial
Name (Print)

Assistance and certify that neither I nor anyone else in my family is receiving alimony or child support in the 2023-2024 school year.

I certify (promise) that all information included with this application is true and that all income is reported. I understand that the school may get federal funds based on the information I give. I understand that school officials may verify (check) the information. I understand that if I purposely give false information, my child(ren) may lose benefits, and I may be prosecuted.

Parent/Caregiver Signature

Date