



Financial Aid Application

1101 Douglas • Normal, IL 61761 • (309) 862-0510 • FAX: (309) 862-0582 • mulberryschool@frontier.com

Please fill out form completely and fax or mail to Mulberry School. You can type directly in the fields below or print and fill out by hand. ALL INFORMATION ON THIS FORM IS CONFIDENTIAL.

Please attach a copy of your most recently signed and filed Federal 1040 Income Tax form.

_____	_____	_____
Last name	First name	Middle

I. Employment

_____	_____	_____
Employer	Occupation	Length of service
_____	_____	_____
Spouse's Employer	Spouse's Occupation	Length of service

II. Other Income (Alimony, child support, rent, social security, family)

_____	_____	Check one: _____ Annually _____ Monthly
Source	Amount	
_____	_____	Check one: _____ Annually _____ Monthly
Source	Amount	
_____	_____	Check one: _____ Annually _____ Monthly
Source	Amount	

III. Assets

Value of real estate owned at reasonable market value (if applicable):
How long have you lived at your current address?

Financial Institutions where personal accounts are held:

_____	_____	_____
Name of institution	Account number	Type of account
_____	_____	_____
Name of institution	Account number	Type of account
_____	_____	_____
Name of institution	Account number	Type of account

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IV. Debts and Liabilities

List all bills for which you are responsible which are not paid in full each month. Include medical bills, rent, credit cards, department stores, installment loans, car payments, etc.

Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:
Owed to:	Monthly payment:

Are any of your accounts delinquent? _____ If yes which ones? (Please explain)

In the space below please explain any special circumstances that you would like the Financial Aid committee to consider in its evaluation of this application.

I hereby certify that the above information is true and correct.

Signature: _____ Date: _____

*Financial aid applications must be received by **April 1st** in order to receive full consideration for aid for the following school year. Financial aid awards are announced in early May and contracts will be adjusted to reflect any award allocated by the Board of Directors. Mulberry School does not discriminate against any individual in regard to student admission, financial aid, or employee hiring, based on race, gender, religion, national origin, ancestry, age, sexual orientation, or any other basis protected by law.*

After completing the form, please print, sign, and mail to Mulberry School, 1101 Douglas Street, Normal, IL 61761

