



FAMILY FINANCIAL STATEMENT

	Parent/Guardian	Parent/Guardian
Name		
Email address		
Mobile Phone		
Home Phone		
	Legal Residence	Legal Residence
Street		
Apt or Unit #		
Town		
State		
Zip		
	Mailing Address	Mailing Address
	Same as above: Yes / No	Same as above: Yes / No
Street		
Apt or Unit #		
Town		
State		
Zip		

FAMILY INFORMATION

Please provide names and ages of all children (less than 18 years of age) living in the home

Child Name				
Child Age				

We know that families come in all sizes. Additional pages for larger families provided at the end of the form

INCOME INFORMATION

The information you provide below will be used to estimate your family’s tuition rate at Sage Montessori. This estimated tuition may be adjusted later to accommodate specific family circumstances. Families that choose not to provide financial information will be expected to pay the maximum tuition on our sliding scale.

The Massachusetts Department of Early Education and Care provides voucher support for families in need.

Please check all the statements that are true for your family

- Our family is interested in learning more about EEC vouchers
- Our family is qualified for EEC vouchers but is currently on the waitlist
- Our family is currently receiving EEC voucher support

Parent/Guardian

Parent/Guardian

Name		
Employer or Business		
Position		
Please circle one	Seasonal / Year Round	Seasonal / Year Round
Please circle one	Full Time / Part Time	Full Time / Part Time

Estimate your income

Please choose any of these time periods

Estimate your income

Please choose any of these time periods

Weekly Income		
Monthly Income		
Annual Income		

We know that many people work multiple jobs and additional pages are provided for additional jobs.

ADDITIONAL INCOME INFORMATION

	Parent/Guardian	Parent/Guardian
Name		
Employer or Business		
Position		
Please circle one	Seasonal / Year Round	Seasonal / Year Round
Please circle one	Full Time / Part Time	Full Time / Part Time
	Estimate your income Please choose any of these time periods	Estimate your income Please choose any of these time periods
Weekly Income		
Monthly Income		
Annual Income		

	Parent/Guardian	Parent/Guardian
Name		
Employer or Business		
Position		
Please circle one	Seasonal / Year Round	Seasonal / Year Round
Please circle one	Full Time / Part Time	Full Time / Part Time
	Estimate your income Please choose any of these time periods	Estimate your income Please choose any of these time periods
Weekly Income		
Monthly Income		
Annual Income		

ADDITIONAL FAMILY INFORMATION

Please provide names and ages of all children (less than 18 years of age) living in the home

Child Name				
Child Age				

Child Name				
Child Age				