



# STAR - Stand Together Assistance Relief Request

Hardship requests are submitted to the Business Office. Jeffrey Barth is the Emergency Tuition Assistance Committee Liaison and will forward your information to the Committee.  
[jbarth@waldorfschool.com](mailto:jbarth@waldorfschool.com)  
 Fax (949) 574-7740

Name of Student(s) \_\_\_\_\_

Grade(s) \_\_\_\_\_

Parent for Best Contact \_\_\_\_\_

Best Phone # \_\_\_\_\_

Type of Hardship: \_\_\_\_\_ Job Loss \_\_\_\_\_ Wage Change \_\_\_\_\_ Serious Illness \_\_\_\_\_ Other

Brief Description of circumstances creating hardship:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## HARDSHIP FACTORS

Provide six months history of **gross income** from businesses , wages, child support, unemployment insurance, and other for the past six months. Identify any new hardship expenses that are currently being incurred and provide. Provide a brief explanation of any changes.

	MONTH/YEAR	GROSS INCOME	NEW EXPENSES	EXPLANATION
1				
2				
3				
4				
5				
6				

## CURRENT OUTLOOK

Use the following table to estimate any changes to Gross Income for the current month and the next two months. Include all income sources including unemployment insurance, etc.

	MONTH/YEAR	GROSS INCOME	NEW EXPENSES	EXPLANATION
1				
2				
3				

Briefly describe what type of relief you are requesting. (How much are you currently paying? How much do you owe? How much can you afford to pay? How do you propose to meet your agreement?)

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Although we do not require documentation with your request, we may request to provide additional information or documentation in order for your request to be approved. In certain cases, families may be required to complete a Tuition Adjustment application through TADS and provide additional documentation.

**I VERIFY THAT THIS INFORMATION IS TRUE AND CORRECT.**

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date