STAR - Stand Together Assistance Relief Request

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?)

_____

_____

_____

Although we do not require documentation with your request, you 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