



# First United Methodist Cooperative Nursery

120 South State Street Ann Arbor, Michigan 48104 (734) 662-7660

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## Application for Financial Aid

- 1) Financial aid is only to be applied against tuition fees and will be deducted from tuition payments. The application fee and registration fee obligations remain with the family.
- 2) Applications for the first semester 2011-12 will be due **June 15, 2011**, with notification as early in July as possible. The winter semester deadline is **December 15, 2011**, with notification occurring as early as possible in January.
- 3) The Executive Board makes all financial aid decisions. The FUMCN Executive Board is made up of the FUMCN presidents, vice-president, treasurer, membership chair(s), and FUMCN teachers.
- 4) All information provided by applicants will remain confidential. The Executive Board reviews the information in part 2 only. Only the treasurer will know who is receiving or applied for financial aid.
- 5) Please return this application to the Treasurer. If you have further questions, please contact any member of the Executive Board.
- 6) Financial aid awards range from partial to full tuition. The amount of the financial aid award is determined by the income to household ratio, other financial circumstances listed in part 2, the number of applications received for any given semester and the availability of funds.
- 7) Applications are for one semester. Families must reapply each semester if they wish to be considered for aid. **Applications received past the due date will be considered in the order received and only if the awards have not yet been awarded.**

While we cannot guarantee every applicant financial aid, please be assured that your request will be treated with the utmost concern and remain confidential.

FUMCN Executive Board  
First United Methodist Co-operative Nursery School



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## Financial Aid Application Form (part 1)

Name of Child: \_\_\_\_\_ Class: \_\_\_\_\_

Name of Child: \_\_\_\_\_ Class: \_\_\_\_\_

Semester: \_\_\_\_\_

Amount of financial aid requested: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

The information I have provided on part 1 & 2 of this application is accurate to the best of my knowledge.

\_\_\_\_\_ (sign) date: \_\_\_\_\_

Household Size	Household Income not exceeding			
				Above
2	\$20,450	\$34,100	\$51,200	Above
3	\$23,000	\$38,350	\$57,600	
4	\$25,550	\$42,600	\$64,000	
5	\$27,600	\$46,000	\$69,100	
6	\$29,650	\$49,400	\$74,250	
7	\$31,700	\$52,800	\$79,350	
8	\$33,750	\$56,250	\$84,500	
Level	A	B	C	

Table based on FY 2009 Income Limits as published by HUD for Ann Arbor

*This page will be detached from Part 2 for consideration by the FUMCN Executive Board.*

(For Treasurer's use only)
Reference: _____ Date Reviewed: _____
Aid Amount: _____ Date Notified: _____



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## Financial Aid Application Form (part 2)

Reference: \_\_\_\_\_ (for Treasurer's use only)

Your income category (A,B,C, or D - from table on previous page): \_\_\_\_\_

Number of people in your household: \_\_\_\_\_

Please give details about your financial needs and circumstances relevant to your application. ***This information may be the determining factor for similar applications.***

Other sources and amount of support/income:

How housing support is received?

Unusual or large expenses (e.g. medical) your family has:

Detail of any other circumstances you feel are relevant to your application:

Note: Information given here is treated on an 'honor' basis, but FUMCN reserves the right to ask for documentary proof of information supplied here before allocating financial aid.