

**New Trier Township High School District 203
Application for Financial Assistance Program
for School Year 2024-25**

1. Student Information		
Name of child(ren)	Student ID	Adviser
2. Parent Information		
Parent Name:		Email:
Street Address:		Phone:
Parent Name:		Email:
Street Address:		Phone:
Part 3. Total Household Income –		
Names of all residents living in household		Relationship to student
1.		
2.		
3.		
4.		
5.		
6.		
7.		
Part 4. Assistance benefits – Please check all benefits you wish to be considered for. Approval for free lunch/student fees/textbooks is based on household income.		
<input type="checkbox"/> Free Lunch program for the 2024-25 school year		
<input type="checkbox"/> Waiver of student fees for the 2024-25 school year		
<input type="checkbox"/> Textbook loan program for the 2024-25 school year		
<input type="checkbox"/> Transportation for the 2024-25 school year		
<input type="checkbox"/> iPad loan program for the 2024-25 school year		

Part 5 Hardship circumstances for consideration: (Example: loss of one's home, unemployment, illness, or other emergencies)

Part 6 Verification and Signature

I have reviewed the District's policy and am specifically aware that supplying false information to obtain financial assistance from the District is a Class 4 Felony (Ill. Rev. Stat., Ch. 38, Sec. 17-6).

I certify that all information contained in this application is true and all income is accurately reported. I understand that school officials may verify any information provided. I understand that if I have purposely given false information, my child(ren) may lose all financial assistance benefits and that I may be subject to prosecution.

Parent/Guardian: _____

Signature

Date

Social Security Number (last 4 numbers only) __ __ __ __ I do not have a Social Security number

Address _____

Contact phone number: _____

Email address: _____

Privacy Act Statement

The District requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free lunch, fee waiver or other financial assistance.

The last four digits of the Social Security Number of the adult household member who signs the application must be included. The last four digits of the social security number is not required if you receive Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF) Program or Food Distribution Program on Indian Reservations (FDPIR) case number or other FDPIR identifier for your child or if applying on behalf of a foster child.