



344 East 14th Street, New York, NY 10003
646.395.4356 www.14streeety.org/afterschool

After School at the 14th Street Y
Application for Financial Assistance
School-Year 2017-2018

ALL FORMS MUST BE RETURNED NO LATER THAN July 31, 2017!

Name of child(ren) applying to After School 2017-2018:

- 1) _____ DOB: ____/____/____
- 2) _____ DOB: ____/____/____
- 3) _____ DOB: ____/____/____

New application **Renewal**

Are you currently a member of the Y? **Yes** **No**

Before submitting the application, please make sure you are including:

- 3 current pay stubs**
- After School 2017-2018 Application**

Additional verification of fixed expenses may be requested.

A separate form must be submitted by the non-custodial parent/guardian.

Return completed form with program application to:

After School at the 14th Street Y
Attn: Patrick Wise
14th Street Y
344 East 14 Street
New York, NY 10003

*Applicants may be asked for 2017 W2 and 1040 forms for confirmation as needed.

ALL MATERIALS AND FORMS WILL BE KEPT STRICTLY CONFIDENTIAL.





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Parent/Guardian 1 Name: _____

Parent/Guardian 2 Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Home Phone #: _____

Cell Phone Parent 1: _____ Cell Phone Parent 2: _____

Names of all Children:

1) _____ DOB: ____/____/____

2) _____ DOB: ____/____/____

3) _____ DOB: ____/____/____

Other Dependents: Name: _____ Relationship: _____

Name: _____ Relationship: _____

Do you rent or own your home? Rent Own

Do you have a second home? If so, do you rent or own it? Rent Own N/A

Parent/Guardian 1- Employment Information:

Name of Employer: _____ Business Phone: _____

Business Address: _____

Number of Years with Employer: _____ Position/Title: _____

Parent/Guardian 2- Employment Information:

Name of Employer: _____ Business Phone: _____

Business Address: _____

Number of Years with Employer: _____ Position/Title: _____





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Family Income:

Annually

- 1. Parent/Guardian 1 Salary: \$ _____
- 2. Parent/Guardian 2 Salary: \$ _____
- 3. Other Income (Interest, dividends, etc.): \$ _____
- 4. Other Income (Alimony, Child Support, Family) \$ _____

Total Family Income:

\$ _____

Expenses:

Monthly

Annually

- | | | |
|-------------------------------------|----------|----------|
| 1. Rent/ Mortgage | \$ _____ | \$ _____ |
| 2. Utilities (Gas, Electric, Phone) | \$ _____ | \$ _____ |
| 3. Insurance (Home, Life, Auto) | \$ _____ | \$ _____ |
| 4. Education: | \$ _____ | \$ _____ |
| 5. Medical: | \$ _____ | \$ _____ |
| 6. Loans: | \$ _____ | \$ _____ |
| 7. Auto Payments: | \$ _____ | \$ _____ |
| 8. Credit Card Payments: | \$ _____ | \$ _____ |
| 9. Other: | \$ _____ | \$ _____ |

Total Expenses:

\$ _____

\$ _____

Assets:

Amount Savings and Investments: \$ _____

Amount Checking: \$ _____

Other: _____ Amount: \$ _____

Other information:

Is anyone in your family currently enrolled in a 14th Street Y or other Educational Alliance program?

YES NO

Which program(s)? _____

Has any family member been enrolled in the past? Please list, with dates of attendance:

Are you currently receiving or have you received financial aid for any of these activities? YES NO

Amount: \$ _____





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AFTER SCHOOL FEES 2017-2018

FULL YEAR	MEMBER EARLY BIRD	NON-MEMBER EARLY BIRD	MEMBER	NON-MEMBER
5 Days	\$4,400	\$4,850	\$4,700	\$5,100
4 Days	\$3,850	\$4,250	\$4,100	\$4,450
3 Days	\$3,500	\$3,800	\$3,700	\$3,950
2 Days	\$2,900	\$3,200	\$3,100	\$3,350
1 Day	\$1,750	\$1,900	\$1,850	\$2,000

SEMESTER ONLY (Fall or Spring)	MEMBER EARLY BIRD	NON-MEMBER EARLY BIRD	MEMBER	NON-MEMBER
5 Days	\$2,450	\$2,650	\$2,600	\$2,800
4 Days	\$2,200	\$2,400	\$2,300	\$2,500
3 Days	\$1,900	\$2,100	\$2,000	\$2,200
2 Days	\$1,750	\$1,900	\$1,850	\$2,000
1 Day	\$1,100	\$1,200	\$1,150	\$1,250

<u>Pick Up Fee for NEST+M and PS110 Schools ONLY</u>	School Year	Semester
3 or more days	\$650	\$350
2 days	\$400	\$220
1 day	\$200	\$110

***Early Bird Ends
July 31st
2017**

Installment Payment Plan: Requires a credit card or EFT authorization. Families are required to make a payment every two months (September, November, January, March, and May)

A 10% discount applies for siblings enrolled in After School. The 10% discount is applied to the second child's registration.

We pick up from Extended Day (Test Prep) Programs for an additional fee. Inquire with us at the email above.

I/We, _____, affirm that the information contained in this financial aid application packet is accurate and true to the best of my knowledge.

Signature of Applicant: _____ Date: _____

