



## CAROL NURSERY SCHOOL

2025-2026 School Year

Dear Parent/Guardian:

Carol Nursery School offers tuition reductions to eligible families in order to make its programs available to a wide range of students. The reductions are made on a sliding scale based on the yearly income of the applicant's family. Applicants are required to submit proof of income\* to the Board of Trustees Vice President. This information will anonymously be provided to the Board of Trustees Executive Committee for its consideration and approval by a majority vote. It is also possible for families with emergency expenses or other extenuating financial needs to receive a reduction in tuition.

The amount of financial aid will be calculated by reducing the tuition (excluding snack and student fees) by a percentage based on the applicant's income. The 10% sibling discount is not offered to families receiving financial aid. While Carol Nursery School would like to assist all families in need, there is a predetermined amount of aid available each school year.

The attached application, briefly explaining your financial situation, is required along with your 1040 tax form. Hard copy documents must be submitted to the CNS office no later than April 15, 2025 (No electronic submissions accepted). All applications will be reviewed after the April 15 submission date. In the event that the total amount of the qualifying applications supersedes the amount of the funds available, then applications will be reviewed in the order in which they were received.

Questions, forms and correspondence should be directed to the Vice President of the Board of Trustees to ensure that confidentiality is maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Emma Visnic".

Emma Visnic, Vice President  
Carol Nursery School Board of Trustees  
eblythe23@gmail.com • 216-965-6807

\* In absence of U.S. tax forms - for foreign students:

- 1) Copy of Student Visa
- 2) Copy of letter from university tendering scholarship
- 3) Signed letter stating no U.S. or foreign source of income



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CONFIDENTIAL WHEN COMPLETE

All qualifying submissions will be reviewed after the April 15 submission date.

Parent / Guardian Name(s): \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Student Name \_\_\_\_\_ Class Enrolled \_\_\_\_\_

Student Name \_\_\_\_\_ Class Enrolled \_\_\_\_\_

Student Name \_\_\_\_\_ Class Enrolled \_\_\_\_\_

\*Please attach HARD COPIES ONLY of the following 2024 tax form: **1040** (No supporting schedules or documentation needed.)

Adjusted Gross Income: \_\_\_\_\_

Special Expenses (Please Elaborate):

Medical: \_\_\_\_\_

Disability: \_\_\_\_\_

Casualty: \_\_\_\_\_

Other: \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE: FINANCIAL AID DOES NOT AUTOMATICALLY RENEW. APPLICATIONS MUST BE SUBMITTED FOR EACH SCHOOL YEAR. QUALIFYING AMOUNT IS RECALCULATED WITH EACH YEARS SUBMISSION SO AMOUNT OF AID AND/OR QUALIFYING STATUS COULD CHANGE.**