



## Financial Aid Application

Serving the Chattanooga Homeschool Community for  
22 years with Excellent Curriculum, Biblical Focus,  
Healthy Accountability and Social Interaction  
Email: [hhlearning@epbf.com](mailto:hhlearning@epbf.com) • Phone 423.653.1333  
[www.hhlearning.com](http://www.hhlearning.com)

Please fill this application out if you are seeking financial aid in order to help your child/children take classes at Hilger Higher Learning. All shared information will be kept **strictly confidential** and will only be used for financial aid purposes. **A separate Hilger Higher Learning application, along with your application fees, must be turned in with this application!**

### Contact Information

Name of Parent(s) or Guardian(s): \_\_\_\_\_

Name of Student(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Mom's Cell Phone: (\_\_\_\_) \_\_\_\_\_ Dad's Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

### Eligibility

#### **Financial Need**

1. What was your 2019 adjusted gross income? \$ \_\_\_\_\_

2. How many children under the age of 19 live at home with you? \_\_\_\_\_

3. Do you have other income (gifts, housing/food allowances, worker's comp, free housing, etc.) not included on line #1 above? \_\_\_YES \_\_\_NO

(If yes, list approx. annual value, if over \$500) \$ \_\_\_\_\_

4. In the 2020-2021 calendar school year, do you foresee your income significantly changing compared to the answer in question 1? \_\_\_YES \_\_\_NO

(If yes, please explain – feel free to attach additional sheets if necessary.) \_\_\_\_\_

\_\_\_\_\_

5. Do you have any unusual expenses or indebtedness that we should be aware of? \_\_\_YES \_\_\_NO

(If yes, please explain) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(over)

6. If you have another child or other children you are paying tuition for elsewhere, please enter the monthly amount below, and state how much you will be paying during the 2020-2021 calendar school year for their education.

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7. If requested, for further verification and information, are you willing to provide HHL with a copy of your 1040 tax return for the 2019 year? \_\_\_\_ YES \_\_\_\_ NO (If you checked NO, please explain your reason on a separate piece of paper)

### **Request**

**Please keep in mind that we try to help nearly 20 families each year, with a limited budget.**

In good faith, what amount can you afford to pay for the year?        \$\_\_\_\_\_

How much financial aid are you requesting for the year?                \$\_\_\_\_\_

### **Signature**

By signing below...

1. I hereby declare that the information provided by me in this Financial Aid Application is true, correct and complete to the best of my knowledge.
2. I agree to provide substantiation for any of the information provided by me, if requested to do so by HILGER HIGHER LEARNING, Inc. Failure to provide substantiation by the requested date is grounds for removing my application from consideration. I understand the following: **(a)** that submitting a Financial Aid Application does not guarantee assistance will be offered to my household; **(b)** that assistance is premised upon meeting eligibility requirements; and **(c)** that the amount of assistance, if any, is premised upon formulas applied to all eligible applicants who submit timely applications.
3. I understand that HILGER HIGHER LEARNING, Inc. does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational, application, employment and financial assistance policies, nor in any of the programs it administers.

**Signed:** \_\_\_\_\_ **Date** \_\_\_\_\_

**All applications should be turned in to the HHL front office or mailed to the address below. Also, please remember that a separate Hilger Higher Learning Application, along with all applicable application fees, must have already been submitted or be turned in with this application.**

Hilger Higher Learning, Inc.

412 East and West Road

Lookout Mountain, TN 37350