

2012-2013 financial aid assessment **school sign-up** form

Welcome! Please complete this form as thoroughly as possible. If you have questions, please contact us at 1.888.210.4857 or support@tads.com for assistance.

Once this form is completed, please fax it to us at 612.548.3361 and we'll complete the setup process and send credentials for the administrator web interface.

As always, we are here to assist and welcome your calls.

Agreement Between TADS and Financial Aid Program

1. Auncor, Inc. d/b/a TADS (hereafter referred to as TADS), agrees to assist

School Name: _____ City, State: _____ (hereafter referred to as FINANCIAL AID PROGRAM) by processing application forms submitted by families seeking financial aid.

2. TADS will make every due and deliberate effort to provide FINANCIAL AID PROGRAM with accurate financial need analysis according to the level of processing it has ordered. Prior to making awards, however, administrators should carefully examine all TADS reports, employing their personal knowledge of the applicant families to check for the "reasonableness" of all data. In the event of an error by TADS, TADS' liability is limited to correcting the error and generating new reports.

3. FINANCIAL AID PROGRAM understands that TADS software, documentation and output formats are Copyrighted by TADS, and as such may not be duplicated, distributed or stored in an information retrieval device without the express written permission of TADS.

4. The TADS services, software and associated documentation (if any) is provided for the term of this agreement, which is a period of one year from the date executed by TADS.

5. FINANCIAL AID PROGRAM agrees not to disclose any portion of the documentation or software supplied by TADS to any person other than duly authorized individuals associated with FINANCIAL AID PROGRAM and its affiliates and agrees to take the reasonable steps necessary to preserve the full confidentiality of trade secrets and proprietary rights of TADS.

6. FINANCIAL AID PROGRAM agrees that at the termination of this agreement, the clauses regarding the confidentiality of the information supplied by TADS shall remain in full force and effect.

7. This agreement shall be governed by the laws of the STATE of Minnesota. Any failure by **TADS** to insist upon strict adherence to this agreement shall not be construed as a waiver of the limitation of, or extension of, this agreement.

Our program agrees to these terms	O Yes	O No
Name:		
Title:		
Signature:		
Date:		

OFFICE USE ONLY This form describes a: O Program O School O Subprogram O Special Code O Special Fund O Source





page

contact information

A. District or School Information

Name of School, District or Financial Aid Program Address Line 2 Shipping Address Line 1 City State Zip Fax Ρ Κ 1 2 3 4 5 6 7 8 9 10 11 12 13 Grades in school (choose all that apply) Grades eligible for aid (choose all that apply) П **B.** Primary Contact Information Last Name First Name Title Phone Number Address / Building / Room Number (if not same as shipping address for school) E-mail Address C. Secondary Contact Information Last Name First Name Title Phone Number Address / Building / Room Number (if not same as shipping address for school) E-mail Address If you require additional personnel to be included in this process, please attach their information on a separate sheet. D. School Association Information 1. Is your school associated with an umbrella organization such as a diocese, synod, etc? O Yes O No If 'yes', which organization?





page 2

program services

A. Application Fees

1. How much cost do you want to add to the Application Processing Fee to cover your local expenses?						
2. How much of the Application Processing Fee will yo	our program subsidize?		\$			
3. Will you reimburse TADS if parents do not send pay TADS will send the applicant one request for payment if their	ment for required processing fees? application is submitted without payment	O <u>Yes</u>	O No			
B. Annual Program Fees						
 Annual program fee (choose one option from the choose one option from the choose one option from the choose of \$160 Single School Program (two states of \$0 Consolidated Multi-School Program (two states of \$160 Consolidated Multi-School Program (two st	vo or more schools-one administrator)	O Yes	O No			
2. Do you require Grant Management? (<i>if you answer</i>)	yes, please complete Page 5 of this form)	0 <u>res</u>	O NO			
C. Parent Application and School Rep	oort Deadlines					
1. How should TADS enforce parental deadlines? (choo O We do not specify deadlines for our paren O We specify strict deadlines; TADS should n	ts ••• We specify deadlines; TAI					
 2. What are your parental deadlines and when do you a. Parent application deadlines* #1 (mm/dd/yy) #2 (mm/dd/yy) 	b. Need reports by**#1 (mm/dd/yy)	these deadlines and will once the application is p **This is the date that TA attempt to have your rep possible. Please allow a days between the parent reports complete deadlin	DS will make every ports as complete as minimum of 15 business t deadlines and the			

D. Report Delivery

Unless otherwise requested, all TADS report notifications are sent via email. Please make sure that we have a valid email for the Primary Contact on Administrator form 2.

E. Parent Application Options

1.	Number of Parent Application Packets you want sent to your office (20 applications per packet): The cost of one packet is \$20 including shipping. It is not necessary to include payment with your order for Parent Application	-	# Spanish n invoice for these items.	
2.	Number of Worksheet Packets you want sent to your office (20 worksheets per packet): The cost of one packet is \$5.00 including shipping. It is not necessary to include payment with your order for Parent Application	5	# Spanish an invoice for these items.	
3. Number of additional Tuition Aid Brochures you want sent to your office (20 brochures per packet): # English The cost of one packet is \$8 including shipping. It is not necessary to include payment with your order for Parent Application Forms. TADS will send you an invoice for these items				
4.	Should parents be allowed to apply online?	O <u>Yes</u>	O No	
5.	Who specifically is eligible to apply for financial aid with this program?			

Some schools only allow parishioners, some only allow non-parishioners, others may allow only tithing parishioners or students who are past their first year of enrollment.)





tuition structures page 3

IMPORTANT! If you have one tuition structure for all students, please complete this page. If you have more than one tuition structure for your school, please attach a copy of your tuition schedule / structures to this packet and TADS will create a custom set of tuition structures for you.

Determining Tuitions: If the following form cannot adequately describe your tuition structure, please include your tuition structure on a separate sheet. TADS will create a custom structure for you in our system.

A. How are Tuitions Determined?

T/

1. Is tuition the same	for all stude	nts? (if you offer discour	nts for any students	or multiple children, ansv	ver "no")	O Yes O No
		ition and go on to the nue to the next questio		rest of this page)		\$
		ng that pertain to your e both a and b	tuitions:			
		d discounts as below (µ e, please enter "\$0" into		tion amount per student,):	not the discount o	or percentage. If at some
First C	hild:	\$	Second Child:	\$	Third Child:	\$
Fourth	n Child:	\$	Fifth Child:	\$	Sixth Child:	\$
O b. Our tu	ition is base	d on grade in school (p	lease list actual tuit	ion amount per student):		
Grade	School:					
Pre-Kir	ndergarten:	\$	Kindergarten:	\$	First Grade:	\$
Secon	d Grade:	\$	Third Grade:	\$	Fourth Grade:	\$
Fifth G	Frade:	\$				
Middle	e School:					
Sixth 0	Grade:	\$	Seventh Grade:	\$	Eighth Grade:	\$
High S	chool:					
Ninth	Grade:	\$	Tenth Grade:	\$	Eleventh Grade:	\$
Twelft	h Grade:	\$	Thirteenth Grade	: \$		





customize your formula page 4

IMPORTANT! If you are using TADS suggested values, you do not need to complete this form; leave it blank and proceed to the next page. Values presented below in orange are the TADS suggested values. Answers that are underlined are the TADS default choices to questions.

A. Allowed Monthly Expenses for a	a Fami	ily of Four				
1. Maximum Allowed Housing Expense \$2,200 \$		5 1		3. General Allowance for food, etc. \$1,600 \$		
B. Contributions to Student Education	tion					
 How should TADS distribute Household Contrib Amount from Student Earnings and Savings appendix Amount exempt from earnings 	plied to Percent	ward Student's Tu earnings applied	iition c. Amoui	nt exempt from sa		cent savings applied
\$3,000 \$				0 \$		%%
3. Minimum tuition for students not in your school(s):		Grade School \$		High School \$		College/Trade School \$
4. Maximum tuition for students not in your school(s):	ł,000	\$	\$8,000	\$	\$10,000	\$
5. Maximum allowed for non-tuition expens- es (books, bus, uniforms, etc.) for all students: (including students applying at your school or at other schools)	\$0	\$	\$0	\$	\$0	\$
 6. If your school(s) have widely differing tuitions (a. Minimum Tuition Allowed: \$0 \$ 		n is relevant only fo b. Maximum Tuit \$99,999 \$	ion Allowed:			
C. Yearly Maximums Allowed for ce	ertain	Expense Ite	ms			
1. Out-of-pocket medical costs \$18,000 \$		2. Contribution t \$4,000 \$			 Child suppo \$13,000 	rt per child \$
4. Alimony payments \$11,000 \$		5. Retirement co \$10,000 \$_				
 6. Should elderly care and child day care expenses 7. Max % of capped day care expenses: 75% 	-		-		⊙ <u>Yes</u> :: 25%	
D. Percent of Net Asset Type Addee	d to W	Veighted Ass	ets			
1. Liquid assets 2. Home equity 100% % 20% 6. Retirement: S 40% %	elf-Man	_% 40% aged 7. Retir	/o	% 2		%
E. Other Values Affecting the Use of	of Ass	ets				
 Retirement exclusion per year. Years are calculat Percent of excess weighted assets added to Hou 				of household and s		\$4,500 \$%
F. Percentage of HAI applied to HC 1. What percentage of Household Adjusted Incom-		d be applied to th	e Household	Contribution to E	Education?	
a. \$0-\$8,000 b. \$8,001-\$12,000 c. \$12,00 20%% 25%% 30% _						-





page 5 grant management

IMPORTANT! If you only have one grant, please complete this page. If you have more than one grant for your school, please copy this page and submit a page for each grant your school has.

Multi-Level Grant Management: If you are interested in a multi-level grant management system for your multi-school organization, please contact us and we will create a custom structure for you.

A. Fund Description

1. Please name or describe this fund:

B. Fund Amounts					
1. Total amount of Grant Fund:			\$		
2. Amount of Grant Fund that should be reserved for late applicants:			\$		
3. Late grant distribution date:		-			(mm/dd/yy)
C. Selection Criteria					
1. Should applications that have minor unresolved issues (rated Fair) b		O Yes			
2. Should applications that have major unresolved issues (rated Poor) b	be excluded?		0 <u>Ye</u>	<u>'S</u>	O No
3. List the grade range eligible for this fund:				to	
D. Method of Grant Distribution					
1. Method of distribution (<i>choose up to three</i>):			met Need	Equal S	Stress
E. Minimum and Maximum Grants					
Please answer either question #1 or #2 below. Do not fill out both ques	stions.				
1. If minimum and maximum grants are the same for all applicants in t	he group selected abov	/e, enter those	amounts:		
a. Minimum Grant: \$ b.	Maximum Grant: \$				
2. If grants should be a percentage of each applicant's tuition, enter the	ose amounts:				
a. Absolute dollar minimum:				\$	
b. Minimum percent of tuition:					%
c. Maximum percent of tuition:					%

c. Maximum percent of tuition: