



OFFICE OF FINANCIAL AID
16300 OLD EMMITSBURG ROAD
EMMITSBURG, MARYLAND 21727

301.447.5207
FAX: 301.447.5915
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PRIVATE ELEMENTARY/HIGH SCHOOL TUITION FORM 2020-21 Academic Year

Please check one of the following Continuing Student New Student

Applicant's Name

Applicant's MSM ID or SSN

The purpose of this form is to report private school tuition expenses during the **2020-21** academic year. Report private elementary, junior high and high school tuition actually paid for family members other than the applicant. **Do not include tuition paid by scholarships or payments for fees, books, supplies, or room and board.**

Full Name of Family Member	Age / Grade	Name of School	Tuition Amount (net of financial aid)
_____	___ / ___	_____	_____
_____	___ / ___	_____	_____
_____	___ / ___	_____	_____
_____	___ / ___	_____	_____
_____	___ / ___	_____	_____

I attest that the above information is accurate. Furthermore I (we) understand that the above data will be used to determine eligibility for Federal and Mount St. Mary's financial assistance and is subject to verification by Mount St. Mary's University.

Applicant's Signature _____ Date _____

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Complete this form only if it applies to you. Return to:
Financial Aid Office
Mount St. Mary's University
Emmitsburg, MD 21727
Fax: 301-447-5915
Phone: 301-447-5207