

Application for Partial Tuition Waiver for Regional Summer School Courses



Montgomery County Public Schools
Office of the Chief Financial Officer
School and Financial Operations Team
850 Hungerford Road, Rockville, Maryland 20850

**MCPS Form 325-4
May 2019**

INSTRUCTIONS: To submit this form, follow the instructions in the confirmation e-mail you will receive from the 2019 Regional Summer School Office.

Student MCPS ID number _____

Student's name _____
Last
First
MI

I qualify for (check appropriate box below):

Students Registering for Regional Summer School Courses (not including ESOL courses)	
If your income is:	You pay:
Family assistance agency <i>(requires copy of letter from agency)</i>	\$85 <input type="checkbox"/>
\$0–\$32,630	\$85 <input type="checkbox"/>
\$32,631–\$46,435	\$120 <input type="checkbox"/>
Over \$46,435 <i>(if your income is over \$46,435 you do not need to complete this form. Payment instructions will be provided to you.)</i>	\$300
For Students Registering in Regional Summer School ESOL Courses	
If your income is:	You pay:
Family assistance agency <i>(requires copy of letter from agency)</i>	\$40 <input type="checkbox"/>
\$0–\$46,435	\$40 <input type="checkbox"/>
Over \$46,435 <i>(if your income is over \$46,435 you do not need to complete this form. Payment instructions will be provided to you.)</i>	\$140

I certify that the information on this form is true and that my total household income is reported. I understand that school officials may verify the information on this form. I understand that if I purposely give false information, I may have to pay full summer school tuition.

Parent/Guardian (Print Name) _____

Signature, Parent/Guardian _____ Date ____/____/____

DISTRIBUTION: Submit one copy with 2019 Regional Summer School Payment Form.