

HOW TO APPLY FOR FINANCIAL AID THROUGH FACTS MANAGEMENT COMPANY

Please use this document as a guide, noting that dates on the actual application should reflect the 2021-22 school year.

Log in to your FACTS Management account, and navigate to the Financial Aid application to begin. Select the application for 2021-22.

Then follow the steps outlined in the next pages.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Schools

Please list all schools and organizations where you would like to apply for financial aid or will pay tuition in the 2021-2022 school year.

- St. Joseph School-York
York, PA 17402
-

Organizations

- Diocese of Harrisburg (required) [?](#)
Organization associated with St. Joseph School-York
-

Application Form

- 1 Schools
- 2 Applicant**
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Applicant [?](#)

Required fields are marked with *

Prefix

* Legal First Name

Middle Name

* Last Name

Suffix

* Address Line 1

Address Line 2

* City

Continue to complete all sections of this part of the form.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant**
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Co-Applicant

Required fields are marked with *

Prefix

* Legal First Name

Middle Name

* Last Name

Suffix

* Social Security Number [?](#)

* Date of Birth

Continue to complete all sections of this part of the form.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students**
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Students

Required fields are marked with *

▼
St. Joseph School-York

* Legal First Name

Middle Name

* Last Name

* Social Security Number

* Date of Birth

Gender

- Female
 Male

* Religious Affiliation

* Is this student applying for financial aid?

- Yes
 No

Schools

Please select the school(s) and organization(s) where your student would like to apply in the 2021-22 school year.

St. Joseph School-York

* Grade for 2021-22

Organizations

First Choice is the school your student will attend or would most like to attend associated with the organization.

Diocese of Harrisburg

* First Choice **Undecided**

[+ Add New School](#)

* How much of this child's tuition can you and/or the co-applicant pay?

 per year

* Do you share tuition responsibility for this student with an individual not included on this application?

- Yes
 No

* Select the county of the public school your student would be assigned to attend, if they attended a public school.

Continue to complete all sections of this part of the form.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income**
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Taxable Income

Required fields are marked with *

Household

* Number of adults living in this household? [?](#)

Select... ▼

* Number of children living in this household?

Select... ▼

Taxable Income

* Does the applicant receive income reported on a W-2?

Yes

No

* Does the co-applicant receive income reported on a W-2?

Yes

No

* Does the applicant file a U.S. Federal Income Tax Return?

Yes

No

* Does the applicant file a U.S. Federal Income Tax Return?

Yes

No

* Does the co-applicant file a U.S. Federal Income Tax Return? [?](#)

Yes - files jointly

Yes - files separately

No

Do you own any of the following?

Business

Rental Property

Partnership

Farm

S Corporation

Estates and Trusts

Diocese of Harrisburg Additional Questions

* Please review the State Income Eligibility Guidelines before submitting your application if you are applying for the Neumann Scholarship Foundation EITC and/or OSTC awards to ensure you meet the qualifications. The FACTS Application fee is non-refundable. FACTS assumes no liability whatsoever should financial aid be denied for any reason. . [PA EITC/OSTC Program Requirements](http://dced.pa.gov/program/)

Application Form

Continue to complete all sections of this part of the form.

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income**
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Nontaxable Income

Required fields are marked with *

If you collect any nontaxable income, please select it below.

- Alimony Received ?
- Child Support
- Temporary assistance for needy families (TANF)
- Welfare
- Supplemental Nutrition Assistance Program (SNAP)
- Tuition support from friends/relatives/employers ?
- Workers' Compensation
- Housing Allowance (Military, Religious, Parsonage, etc.)
- Tax-Exempt Interest
- Other Nontaxable Income (e.g. Foster Care Allowance, VA Benefits, etc.) ?

Social Security ?

If household members collect nontaxable social security income, please select it below.

- Applicant Name
- Co-Applicant Name
- Preview Student
- Student Name
- Other Household Members

Application Form

Continue to complete all sections of this part of the form.

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income**
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Change of Income

Required fields are marked with *

* Do you anticipate a decrease in your annual income for 2020?

Yes

No

What is your anticipated 2020 income?

What is the co-applicant's anticipated 2020 income?

Select the reason(s) for your reduced income (Select all that apply)

	Applicant	Co-Applicant
Unemployment or expected to be unemployed	<input type="checkbox"/>	<input type="checkbox"/>
Reduced hours	<input type="checkbox"/>	<input type="checkbox"/>
Reduced wages	<input type="checkbox"/>	<input type="checkbox"/>
Exiting the workforce	<input type="checkbox"/>	<input type="checkbox"/>
Legal separation or divorce	<input type="checkbox"/>	<input type="checkbox"/>
Plan to retire	<input type="checkbox"/>	<input type="checkbox"/>

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses**
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Monthly Expenses

Required fields are marked with *

* Do you rent or own your primary residence? [?](#)

* Monthly rent or mortgage payment (include principal, interest, taxes, and home insurance) [?](#)


* Do you own a second home (not including rental property)? [?](#)

Yes

No

* Monthly home equity loan payments

*Add all vehicles leased or owned, including any vehicle that does not have a monthly payment. Please do not include insurance expense.

YEAR	MAKE/MODEL	MONTHLY PAYMENT	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

[+ Add New Vehicle](#)

Credit Cards and Other Loans

* Total Credit Card Debt [?](#)

* Total of all minimum amounts due on monthly credit card statements [?](#)

* Monthly student loan payments for family members no longer attending college [?](#)

* Do you have other monthly loan payments (do not include cell phone, utilities, or other living expenses)? [?](#)

Yes

No

* Monthly alimony payments [?](#)

* Monthly child support payments [?](#)

* Health insurance premiums paid per month

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses**
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit

Annual Expenses

Required fields are marked with *

* Annual vehicle insurance expense

* Total annual out-of-pocket medical expenses not paid by insurance

* Charitable contributions - cash or checks per year

College Expenses

* Number of family members attending college beginning this fall

Child/Day Care Expenses

* Number of children for whom you pay child/day care expenses beginning this fall

Elder Care Expenses

* Number of people for whom you pay elder care expenses

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities**
- 11 Additional Questions
- 12 Review
- 13 Submit

Assets and Liabilities

Required fields are marked with *

* Value of cash, savings, and/or checking accounts [?](#)

* Value of stocks, bond investments, mutual funds, and/or certificates of deposit [?](#)

* Value of your 529 plan accounts [?](#)

* What is your expected contribution in 2020 to 529 plan accounts?

* Value of retirement plan assets [?](#)

* What is your and/or your spouse's annual contribution to retirement plan assets?

* What is the estimated value of your home? [?](#)

* What is the amount you owe for your home? [?](#)

* What is the estimated value of your second home?

* What is the amount you owe for your secondary home?

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions**
- 12 Review
- 13 Submit

Additional Questions

Required fields are marked with *

Use the space below to add any information or comments which you feel might be helpful in determining your family's qualification for tuition assistance

St. Joseph School-York Additional Questions

* Please describe any additional circumstances you feel we should take into consideration for your financial aid application.

Diocese of Harrisburg Additional Questions

* I/We hereby acknowledge that all information presented within this application is honest and accurate. I understand that by submitting this application I am not guaranteed to receive a scholarship award. I certify that I have read and reviewed all guidelines associated with the EITC/OSTC awards through the Neumann Scholarship Foundation.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review**
- 13 Submit

Review

Before submitting the form, please review and check if all the details have been captured correctly.

Schools

St. Joseph School-York

Organizations

Diocese of Harrisburg

Applicant

Prefix:

First:

Middle:

Last:

Suffix:

Address Line 1:

Address Line 2:

City:

State:

Zip Code:

County of Residence:

Country: **United States**

Daytime Phone:

Evening Phone:

Cell Phone:

Email Address:

Social Security Number: (Not Displayed)

Date of Birth: 12/31/1969

Marital Status:

Relationship to Student(s):

Continue to review all sections of this part of the form.

Application Form

- 1 Schools
- 2 Applicant
- 3 Co-Applicant
- 4 Students
- 5 Taxable Income
- 6 Nontaxable Income
- 7 Change of Income
- 8 Monthly Expenses
- 9 Annual Expenses
- 10 Assets & Liabilities
- 11 Additional Questions
- 12 Review
- 13 Submit**

Submit Application

Total Amount

Application Fee \$35.00

Total **\$35.00**

Payment Method Disclosure

Card transactions are processed by
FACTS Management Company, USA.

By clicking "Submit Application", you are agreeing to the terms and conditions.

[View Terms and Conditions](#)

[Previous](#)

[Submit Application](#)

[Exit](#)

Applicants are responsible for uploading all requested tax information, including W-2 forms and tax forms
BY MARCH 1ST.

If you do not have access to a scanner, please contact Mrs. Jennifer Danczyk, Administrative Manager
by February 16th, at Danczyk@sjy.org.