

## Financial Aid

Financial Aid is available to families who meet the Eligibility Standards. The Application Deadline is August 10th. If you would like to re-apply for the next school year, you must resubmit a Financial Aid form.

### Eligibility

Those applying for financial aid must be current on their account.

- Financial aid is for the current school year and cannot be applied to any outstanding tuition.

Financial aid applicants must be eligible for the Minnesota reduced lunch program.

- See chart below.

Financial aid applicants must have one or more children enrolled in Kindergarten - 12th Grade.

- Financial aid for Preschool students is only available if there is a sibling enrolled in Kindergarten - 12th grade.

### Maximum Award

Financial aid can equal no more than 25% of the total tuition.

- Total tuition equals yearly tuition minus applicable multiple child discount(s).

*For School Use Only*  
School Nutrition Programs

### Household Income Guidelines for School Year 2021-22

Effective July 1, 2021

#### Household Size of One (1)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 322	323-459	460 or more
Bi-Weekly	0 – 644	645-917	918+
2x per month	0 – 698	699-993	994+
Monthly	0 – 1,396	1,397-1,986	1,987+
Yearly	0 – 16,744	16,745-23,828	23,829+

#### Household Size of Two (2)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 436	437-620	621 or more
Bi-Weekly	0 – 871	872-1,240	1,241+
2x per month	0 – 944	945-1,343	1,344+
Monthly	0 – 1,888	1,889-2,686	2,687+
Yearly	0 – 22,646	22,647-32,227	32,228+

#### Household Size of Three (3)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 549	550-782	783 or more
Bi-Weekly	0 – 1,098	1,099-1,563	1,564+
2x per month	0 – 1,190	1,191-1,693	1,694+
Monthly	0 – 2,379	2,380-3,386	3,387+
Yearly	0 – 28,548	28,549-40,626	40,627+

#### Household Size of Four (4)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 663	664-943	944 or more
Bi-Weekly	0 – 1,325	1,326-1,886	1,887+
2x per month	0 – 1,436	1,437-2,043	2,044+
Monthly	0 – 2,871	2,872-4,086	4,087+
Yearly	0 – 34,450	34,451-49,025	49,026+

#### Household Size of Five (5)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 776	777-1,105	1,106 or more
Bi-Weekly	0 – 1,552	1,553-2,209	2,210+
2x per month	0 – 1,682	1,683-2,393	2,394+
Monthly	0 – 3,363	3,364-4,786	4,787+
Yearly	0 – 40,352	40,353-57,424	57,425+

#### Household Size of Six (6)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 890	891-1,266	1,267 or more
Bi-Weekly	0 – 1,779	1,780-2,532	2,533+
2x per month	0 – 1,928	1,929-2,743	2,744+
Monthly	0 – 3,855	3,856-5,486	5,487+
Yearly	0 – 46,254	46,255-65,823	65,824+

#### Household Size of Seven (7)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 1,033	1,034-1,428	1,429 or more
Bi-Weekly	0 – 2,006	2,007-2,855	2,856+
2x per month	0 – 2,174	2,175-3,093	3,094+
Monthly	0 – 4,347	4,348-6,186	6,187+
Yearly	0 – 52,156	52,157-74,222	74,223+

#### Household Size of Eight (8)

Frequency of Income	Free Meals \$	Reduced Price Meals \$	Paid Meals \$
Weekly	0 – 1,117	1,118-1,589	1,590 or more
Bi-Weekly	0 – 2,233	2,234-3,178	3,179+
2x per month	0 – 2,420	2,421-3,443	3,444+
Monthly	0 – 4,839	4,840-6,886	6,887+
Yearly	0 – 58,058	58,059-82,621	82,622+

#### Household Size of Nine or More (9+)

Household income must be within the amount shown above (household of 8), plus the amount show below for each additional household member.

Frequency of Income	Free Meals \$ Range	Reduced-Price Meals \$ Range
Weekly	114	162
2 Weeks	227	324
2x/month	246	350
Monthly	492	700
Yearly	5,902	8,399



## Financial Aid Application

Mother (or Guardian)	Father (or Guardian)		
Address	City	State	Zip
Mother's Address if different	City	State	Zip
Mother's Email	Primary Phone Number	Secondary Phone Number	
Fathers Address if different	City	State	Zip
Father's Email	Primary Phone Number	Secondary Phone Number	

**Child(ren) attending Heartland:**

STUDENT'S NAME	GRADE

Amount of financial aid requested: \_\_\_\_\_

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

**Required Documents:**

- Enrollment Application
- Copy of most recent 1040 Federal Income Tax form

Applications must be received by August 10th.

Office Use only:

Financial Aid Awarded:	Date Approved:
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