

MEANS OF SUPPORT FORM
 Prek12 Programs Outreach Support Services
 School Year 2023-24



KAMEHAMEHA SCHOOLS®

Student Last Name: _____ Student First Name: _____

Parent/Legal Guardian (Your) Name: _____

The Means of Support form is a required document for applicants who do not file taxes and/or have an income of \$5,000 or less for 2021. **Complete this form and upload to your Financial Aid or Scholarship application by the program deadline you are applying to.** If we do not receive this form the student's application is considered incomplete and will not be reviewed.

MONTHLY EXPENSES IN 2021 (Please estimate the total support provided for each section. Blank forms will be returned)		
Type of Expense	Estimated Monthly \$ Amount	Source of Financial Support
<i>Example: Housing</i>	<i>\$500.00</i>	<i>Student's Grandparent(s)</i>
Housing*		
Utilities*		
Food		
Clothing		
Child Support Payments Paid by you		
Health Insurance and Medical Expenses		
Car Insurance		
Car Payment		
Child Care		
Other:		

Explanation of Circumstances (provide any additional information about your financial situation in 2021)

CERTIFICATION (Please read carefully and sign below)

I/We hereby certify that the above statements are true to the best of my/our knowledge and agree to furnish proof and other documentation as requested. I/We acknowledge that failure to disclose any requested information, or providing inaccurate, incomplete and/or false or misleading information, may result in my or my/our child's disqualification.

 Parent/Legal Guardian #1 Signature

 Date

 Phone Number

 Parent/Legal Guardian #2 Signature (if applicable)

 Date

 Phone Number