

Programs for Talented Youth

FINANCIAL AID APPLICATION

Use this form to apply for financial aid. Your financial aid application must include most recent tax forms (W-2 and 1040) for all wage-earners in the family. We will use this information to determine your eligibility for financial aid and the amount of the award. All awards are for partial tuition. Balance due information will be included with award notification.

APPLICANT INFORMATION (Please type or print)

Applicant's name

	Last	First	Middle
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Date of birth _____

Student is an applicant to the following program: SAVY Career Connections WAVU VSA

HOUSEHOLD INFORMATION

Guardian/Mother's name	Occupation
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Daytime telephone ()	Employer name
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Guardian/Father's name	Occupation
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Daytime telephone ()	Employer name
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Parents' current marital status Married Divorced Separated Single Widowed

Applicant lives with (check all that apply) Mother Father Guardian Grandparent(s)

List the names of all people living in the applicant's main household, related or not, such as grandparents, other relatives, friends.
(You may use a separate piece of paper, if needed)

Name and relationship to the applicant (List the applicant first)	Age
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Name and relationship to the applicant	Age
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HOUSEHOLD INCOME INFORMATION

Do you or any people living in the student's main household (grandparents, other relatives, friends, etc.) receive:

Child support payments? Yes No **If yes, \$ _____/month**

Social Security payments? Yes No **If yes, \$ _____/month**

SSI payments? Yes No **If yes, \$ _____/month**

Welfare, or any other public assistance? Yes No **If yes, \$ _____/month**

Does applicant qualify for free lunches at school? Yes No

Housing, food, or other living allowances paid to members of the clergy, military, and others?
(Do not include Military Housing Privatization housing allowance)

Yes No If yes, \$ _____/month

Financial assistance from people who are not members of the household?
(Include expenses paid on your behalf)

Yes No If yes, \$ _____/month

Untaxed workers compensation, disability, retirement, or veterans' benefits?

Yes No If yes, \$ _____/month

Any other income not listed above and not reported on your federal tax return?

Yes No

If yes, list type of benefit(s) and amount(s) below:

_____/month
\$ _____/month
_____/month
\$ _____/month

ASSETS INFORMATION

Current value of cash/savings/checking	\$ _____
Current value of stocks and investment accounts	\$ _____
Current value of your business(es) or farm(s)	\$ _____
Balance of associated loan(s)	\$ _____
Current value of other real estate owned	\$ _____
Balance of associated loan(s)	\$ _____
Current value of your home (if you own)	\$ _____
Balance of associated loan(s)	\$ _____

EXPENSES

Monthly rental payment if you rent your home	\$ _____
Monthly mortgage payment if you own your home	\$ _____
Annual child support/alimony payment	\$ _____
Annual amount you pay out of pocket for family medical expenses not covered by insurance	\$ _____
Annual amount of out-of-pocket expense for tuition and fees	\$ _____
Travel expense to program	\$ _____
Number of children in college	_____

Please explain any special circumstances that we should consider when awarding financial aid.

All financial aid applications must include a signed copy of your most recent federal income tax return or free lunch letter.

Include copies of all forms and schedules listed below that were included in your tax return, including:

W-2 Forms • Form 1040, 1040A, or 1040EZ • Form 4562 • Schedule A • Schedule C and/or F • Schedule D

If you are divorced, you are required to include tax forms for only the custodial parent.

If you are completing your financial aid application before you have completed your 2018 tax return, you may send a copy of your 2017 tax return and all applicable schedules and forms. Please also attach copies of your 2018 W-2 forms for all wage earners in the household. If you have not yet received a 2018 W-2 form, you may substitute a copy of your 2018 year-end pay stub, if it includes 2018 year-end earnings information. If it does not, you may substitute a signed statement from your employer on company letterhead.

I certify that all statements, information, and attachments submitted with this form are truthful, accurate, and complete.

Signature of parent or legal guardian

Date