



2023-2024 APPLICATION FOR FINANCIAL AID

In order to be considered for scholarship assistance, please:

1. Complete and sign this application, and
2. Provide proof of income documents:
 - 2020 IRS tax return or W-2 forms, **AND**
 - One recent month of paycheck stubs **from all working adults in the household.**
 - Benefits letters for anything listed in Section 4
 - Employer letters verifying cash income (example: housekeeping, day labor, etc.)

1. Enrolled Student's Name (s): _____

2. Household Member Names:

<u>Adults</u>	<u>Other Children</u>
_____	_____
_____	_____
_____	_____
_____	_____

3. **GROSS** Income per paycheck -- **before payroll deductions** (check how often paid):

Member 1 \$ _____ weekly every other week 2x/mo. monthly
(i.e., every other Friday) (i.e., 1st & 15th)

Member 2 \$ _____ weekly every other week 2x/mo. monthly
(i.e., every other Friday) (i.e., 1st & 15th)

Member 3 \$ _____ weekly every other week 2x/mo. monthly
(i.e., every other Friday) (i.e., 1st & 15th)

If Self-Employed \$ _____ annual (provide document per yellow box above)

4. Other Incomes **per Month**:

Social Security/Retirement	\$ _____	Child Support	\$ _____
TANF	\$ _____	Unemployment	\$ _____
Food Stamps	\$ _____	Other	\$ _____
		<small>(Please specify)</small>	

I certify that the above information is, to the best of my knowledge, true and correct and agree to provide current proof of income. I understand that failure to provide adequate proof of income will make me ineligible for scholarship assistance.

Signature of Parent/Guardian

Printed Name

Phone Number

Date