

Scholarship Budget Information

Please complete this only if it is required by the scholarship criteria.

Student Budget Information: Please be thorough in completing all budget information. The information will be given a high priority in the selection of award recipients.

Carefully estimate total resources available to you as well as necessary expenses to be incurred during the school year covered by this application.

If you are a **dependent** or an **independent** student, calculate expenses on a 9-month budget. A dependent student would: have lived with parent(s)/guardian(s) for 6 consecutive weeks during the last 12 months; was or will be listed as an exemption on parents' Federal Income Tax Return for the past year; OR student did or will receive \$750 or more in financial assistance from parent(s)/guardian(s) during the past 12 months. If you can answer yes to one of the above criteria, you are a dependent student.

I am: _____ an independent student _____ Number in household
 _____ a dependent student _____ Number in college

APPLICANT'S EXPENSES			APPLICANT'S INCOME	
Tuition Fee	\$		Aid from parents or relatives	\$
Books & Supplies	\$		Earnings while in school	\$
Rent	\$		Applicant's Summer Earnings	\$
Food	\$		Savings to be used in 2011-2012	\$
Transportation	\$		Spouse's Earnings	\$
Utilities	\$		Income Tax Return	\$
Child Care	\$		Veterans Benefits	\$
Alimony	\$		Voc Rehab	\$
Insurance Premiums	\$		Welfare Benefits	\$
Medical/Dental	\$		Scholarship/Grants	\$
Personal Expenses	\$		Child Support	\$
Car Payment (Make & Year)	\$		Interest, Dividends, Savings	\$
Debt Payments – Specify:			Do you own your own home?	
Creditor	Monthly Payment		If yes, value \$	
	\$	\$	Other sources, specify:	
	\$	\$		\$
	\$	\$		\$
TOTAL EXPENSES			TOTAL INCOME	\$

Comments: Any additional information which you feel is important to your financial situation.

Applicant's Statement: I hereby certify that the information submitted herein is true and correct to the best of my knowledge. The information will be kept confidential.

Applicant's Signature _____ Date _____