# FINANCIAL AID FORM

**APPLICANT NAME:** ___________________________  **DOB:** __________

## I. Parent/Guardian Information:

**Parent/Guardian A:**

**Name:** ___________________________  **Employer:** ___________________________

If Unemployed, explain here:


**Parent/Guardian B:**

**Name:** ___________________________  **Employer:** ___________________________

If Unemployed, explain here:


## Non-applicant Dependent Information:

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<th>NAME</th>
<th>DOB</th>
<th>SCHOOL and YEAR</th>
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II. Family Income

A. Salary and Wages:

   1. Total Salary Wages earned by Parent/Guardian A:
      Previous Year: ____________________  Current Year (estimate): ____________________

   2. Total Salary Wages earned by Parent/Guardian B:
      Previous Year: ____________________  Current Year (estimate): ____________________

   3. Total Dividends and Interest Income:
      Previous Year: ____________________  Current Year (estimate): ____________________

   4. Other Taxable Income:
      Previous Year: ____________________  Current Year (estimate): ____________________

B. Nontaxable Income:

   1. Child Support:
      Previous Year: ____________________  Current Year (estimate): ____________________

   2. Social Security Benefits:
      Previous Year: ____________________  Current Year (estimate): ____________________

   3. Other Nontaxable Income:
      Previous Year: ____________________  Current Year (estimate): ____________________

III. Family Assets and Debts

A. Real Estate:

   1. Do you own the home you currently live in?
      Previous Year: ____________________

   2. What year did you purchase your home?
      Previous Year: ____________________

   3. What was the purchase price?
      Previous Year: ____________________

   4. What is the current market value of your home?
      Previous Year: ____________________

   5. What is the remaining unpaid principal on your first mortgage? This should not include interest payments or property taxes?
      Previous Year: ____________________

   6. Enter the total ANNUAL payments on your first mortgage:
      Previous Year: ____________________

   7. Do you have a second mortgage?
      Previous Year: ____________________

   8. Enter the amount you pay each year on the second mortgage?
      Previous Year: ____________________

   9. Do you own any additional real estate other than your primary residence?
      Previous Year: ____________________
B. **Vehicles:**

1. How many vehicles do you own or lease?

2. Please identify the vehicle make model for each vehicle, and the current debt/annual lease cost:

   a. 

   b. 

   c. 

   d. 

C. **Other Assets and Debts:**

1. Enter total value of the checking and savings accounts held by parent(s)/guardian(s):

2. Enter value of all investments:

3. Enter total value of retirement plan, pension, IRA held by parent(s)/guardian(s):

4. Enter your outstanding debt:

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IV: **Family Expenses:**

A. **Educational Expenses:**

1. Expenses for Applicant:

2. Total Expenses for all Dependents:

B. **Medical Expenses:**

1. Enter total medical expenses not paid by insurance:

   Previous Year: 

   Current Year (estimate):

C. **Additional Expenses:**

1. Enter unusual expenses you incurred:

   a. What were expenses for:
V. Other Information:

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