

ACADEMIC SCHOLARSHIP
Financial Information Form – Academic Year 2024-2025
(Read Instructions Carefully)

Financial Information: It is the applicant's responsibility to:

1. Complete the top half of this *Financial Information Form*.
2. Submit the form in its entirety to the Financial Aid office of your first-choice academic institution. Please submit it *at least two weeks prior* to the application deadline. They will return the form to you when it is completed.
3. Email the completed form to the Foundation by the application deadline. It is your responsibility to notify the Foundation of any delays.

Applicant Information (to be completed by student)

Name	Date	
Address	Apt. #	
City	State	Zip
Phone	Email address	
Academic Institution	Student ID #	

I authorize this academic institution (noted above) to complete the remainder of this form and return it to me.

Student Signature (required): _____ Date: _____

*****Applicant Stop Here—Send the entire page to your academic institution's Financial Aid Office*****

Information below must be completed by a Financial Aid Officer

To the Financial Aid Officer: Please complete the information below. Estimated financial aid information for new students, and prior year information for returning students, is acceptable. Please return the completed form to the student ASAP.

Assessed Need based on: This Year's FAFSA Previous Year's FAFSA

Anticipated Expenses for 2024-25 based on attendance \$ _____
 Full-time Half-time or less

Anticipated Resources

Family Contribution (EFC from SAR) \$ _____
Scholarships and Grants \$ _____
Other Resources (do not include loans) \$ _____

Total Resources \$ _____

Calculated Need (Expenses Less Resources) \$ _____

Receiving a grant:

- will not adversely affect the applicant's eligibility for other grants/aid
- will impact the applicant's eligibility for other grants/aid if the award is over \$ _____

Name and Title of Fin. Aid Officer _____

Academic Institution	Date
Phone	E-mail

Please return this completed form to student ASAP.