



FINANCIAL AID APPLICATION - CONFIDENTIAL

DATE OF APPLICATION: _____

Applicant Information:

Name of rider: _____ Age of Rider: _____

Name of Parent/Guardian: _____

Home address: _____ Phone: _____

Employer: _____ Phone: _____

Position Held: _____ Length of Present Employment: _____

Business Address: _____

Housing (please mark own or rent): Own Rent _____ Length of time in area _____

Other dependents:

Name	Age	School/Occupation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Income information:

Salary/Wages – Parent/Guardian \$ _____

Salary/Wages – Parent/Guardian \$ _____

Salary/Wages – Rider \$ _____

Sources and amounts of other possible funds:

CHAMPUS \$ _____

State or Local \$ _____

Diplomatic \$ _____

Other private or public sources \$ _____

Amount available for rider’s tuition fees from family resources: \$ _____

Additional Information:

Please include the first page of your most current tax return with this application.

Please include a statement as to why this rider should receive financial assistance. Explain any special family circumstances, about which the financial aid committee should be informed, such as special education requirements of dependents, illnesses, divorce, etc.

NOTE: Due to the large number of financial aid requests, incomplete forms will not be considered.

Signature of Applicant: _____ Date: _____

