

## Application for Financial Aid 2018

The following information is required to apply for scholarship assistance for the Columbia Publishing Course in New York. This application is due before **March 15, 2018**. We realize that you may not have access to your final 2017 income information by this deadline and ask that you complete the materials based on the best estimated figures available. *All scholarship awards are based on financial need.* Therefore, we need full information about the family and personal resources of each financial aid candidate. The information given below will be treated as confidential and will have no bearing on your chance for admission.

Full legal name: \_\_\_\_\_  
Last Name
First Name
Middle

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

### Family Information

Father's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Parents' Marital Status:

- Married   
  Separated/Divorced   
  Mother living/father deceased   
  Father living/mother deceased  
 Other (please explain): \_\_\_\_\_

Please list other people who are dependent on the family's income:

Name	Relationship	Age	School	Annual family contribution to education

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**Academic Information (How was your education financed? List specific amounts for each year.)**

	Freshman	Sophomore	Junior	Senior	Other
Scholarships:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Loans:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Family:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Self:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other:	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

**List family's total annual income in U.S. dollars**

	Actual 2016 Income	Estimated 2017 Income	Primary Income Source		
			Wages	Family Business	Other
Father's earnings:	\$ _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Mother's earnings:	\$ _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Applicant's earnings:	\$ _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
Other income:	\$ _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____
<b>TOTAL:</b>	\$ _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> _____

**List applicant's assets and liabilities**

<u>Assets</u>		<u>Liabilities</u>		
Cash/Savings:	\$ _____	Educational Loans:	\$ _____	_____ When payable?
Investments:	\$ _____	Other Loans:	\$ _____	_____ Please specify
Trusts:	\$ _____	Credit Cards:	\$ _____	
Real Estate:	\$ _____	Other Debts:	\$ _____	_____ Please specify
<b>Total:</b>	\$ _____	<b>Total:</b>	\$ _____	

What sources of funding (e.g. family) can contribute to your tuition? (Please include amounts.): \_\_\_\_\_

**Please specify the total scholarship assistance you will require to attend the course: \$ \_\_\_\_\_**

**Additional Information**

Please describe any additional facts relevant to this application, facts you believe should be considered by the Scholarship Committee. In particular, state circumstances that directly bear on your need for scholarship assistance. Attach an additional page, if necessary.

I declare that the information reported on this form is true, correct, and complete, and that I will send timely notice of any significant change in the family income, assets, or financial situation. I understand that providing false information will jeopardize my admission to the Columbia Publishing Course. I am aware that I may be asked to provide a copy of my or my family members' tax returns.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_