

SCHOLARSHIP APPLICATION FORM – INTERIOR DESIGN

DUE: JANUARY 15, 2007

NAME _____ STUDIO YR. _____ INSTRUCTOR _____
 BIRTH DATE _____ MARITAL STATUS _____ NO. OF CHILDREN _____
 LOCAL ADDRESS _____
 LOCAL TELEPHONE _____ SOCIAL SEC. # _____
 EXPECTED DATE OF GRADUATION _____ EMAIL ADDRESS _____

TYPE OF SCHOLARSHIP (Check All That Apply)

Financial Scholarship (Financial Information Needed)
 Travel Scholarship (Financial Information Needed)
 Professional Promise Scholarship (No Financial Information Needed)

APPLICATION FOR FINANCIAL AID FOR ACADEMIC PERIOD AS CHECKED BELOW:

____ FALL & SPRING (academic year) ____ FALL ONLY ____ SPRING ONLY
 ____ 4-WEEK SUMMER SESSION ____ 8-WEEK SUMMER SESSION
 ____ INTERNAT'L. PROG., COLLEGE OF DESIGN (specify) _____

GENERAL INSTRUCTIONS

- All expenses must be fully explained. Refer to attached Financial Aid Student Budget information.
- All income information must be verified by income tax forms. Estimated income must be reported.
- Failure to provide income tax verification or to report estimated income will disqualify application.
- All information requested must be complete for consideration for scholarships.

ESTIMATED BUDGET/EXPENSES

Tuition _____
 Program Fee (on-campus) _____
 Program Fee (off-campus) _____
 Room & Board _____
 Transportation _____
 Miscellaneous _____
 Other (specify) _____
TOTAL _____

Explain Miscellaneous expenses below.

ESTIMATED INCOME

Summer Employment _____
 Fall Employment _____
 Spring Employment _____
 Parents Support _____
 Spouse/Partner Support _____
 Other (KEES, Grants, Scholarships, etc.) _____
TOTAL _____

List prior year income below.

ASSETS

Real Est. Value _____
 Auto. Value _____
 Stocks & Bonds _____
 Savings & Cash _____
TOTAL _____

Explain any unusual circumstances below with appropriate verification

LIABILITIES

Mortgage Balance _____
 Auto. Loan Balance _____
 Student Educ. Loans _____
 Other debts (specify) _____
TOTAL _____

List previous student loans and financial aid received to date with verification of amounts.

EMPLOYMENT PLAN

Describe summer and academic year employment anticipated (& hrs per week).

FINANCIAL PLAN AND RESOURCES

Outline the plan and the resources through which all expenses will be met during the next academic year.

PARENT FINANCIAL INFORMATION:

- All information requested must be completed for consideration for scholarships.

PARENT NAMES	ADDRESS	TELEPHONE
_____	_____	_____
_____	_____	_____

DEPENDENT'S NAMES/AGES	SCHOOL YR/INSTITUTION	SCHOOL EXPENSES
_____	_____	_____
_____	_____	_____
_____	_____	_____

PARENT'S INCOME (Before taxes - verification with income tax return required)

	OCCUPATION OR SOURCE	<u>2005</u>	<u>2006</u>
Father	_____	_____	_____
Mother	_____	_____	_____
Interest Income	_____	_____	_____
Other Income	_____	_____	_____
Child Support	_____	_____	_____
	TOTAL INCOME	_____	_____

PARENT'S ASSETS		PARENT'S LIABILITIES	
Real Estate	_____	Mortgage Balance	_____
Automobile	_____	Automobile Loan	_____
Stocks & Bonds	_____	Other Loans (specify)	_____
Savings	_____	Other Debts (specify)	_____
Annuities	_____		
TOTAL	_____	TOTAL	_____

PARENT CERTIFICATION for dependent applicants.

____ I/We hereby certify that all information provided above is correct and true. Income tax return verification is provided to confirm this information.

_____	_____	_____	_____
signature	date	signature	date

PARENT VERIFICATION of applicant's independent status.

____ I/We hereby certify that **the applicant for scholarships is not claimed as a dependent** and does not receive financial support from me/us. Income tax return verification is provided to confirm the independent emancipated status of the applicant.

_____	_____	_____	_____
signature	date	signature	date

____ I verify that the information submitted is accurate to the best of my knowledge.

_____	_____	_____	_____
signature	date	Signature	date