

Mother is: ☒ Living ☐ Deceased Occupation (be specific): Customer Resource Manager  
Employed by: Target

How many brothers and sisters do you have living at home? 0 List their ages: N/AHow many siblings will be in college next year? 0What college or colleges? N/ATotal annual income of: (a) Father or Guardian: \$ Unknown (b) Mother: \$ 42,000(c) Siblings living at home: \$ (d) Federal income tax paid by your parents or guardians for last year \$ ARE YOU MARRIED? NoYOUR income as the student: 5,000 Employer: VariesGive your spouse's: (a) Occupation, if employed: N/A (b) income N/A(c) Employed by: N/AHow many children do you have? 0 List their ages: N/AFederal income tax paid by you and your spouse for last year \$ 

List debts or outstanding obligations you have, including loans already received for your education:

*Name of Creditor**Address**Amount**Due Date*

State below any other pertinent information that would be helpful in assessing your need for financial aid.

**PROPOSED BUDGET**Estimate costs and resources for the period of your request which will be from August 2021 to December 2021  
(one semester)**Costs**

Tuition and required fees.....\$ 6,242  
 Books & Supply Allowance.....\$ 500  
 Room and Board.....\$ 0  
 Personal Allowance.....\$ 1500

**Resources**

From parents/others.....\$ 0  
 From other loans .....\$ 0  
 From part-time work/savings.....\$ 500  
 From scholarships/grants (specify on  
 separate sheet and attach.....\$ 5800  
 From all other sources (itemize  
 on separate sheet and attach).....\$ 0

**Total Costs** \$ 8242**Total Resources** \$ 6300**Expected Deficit (Costs Minus Resources)** \$ 1942

I hereby state that the information I have supplied in this application for financial assistance is true and correct to the best of my knowledge. I also hereby state that I do not object to the release of my academic record to anyone concerned with the evaluation of the merits of this application. If granted, I will look upon this aid as a debt of honor to be repaid by me to the Ernest B. Ellis Foundation, without interest. I hope to be able to begin these payments to the Foundation within 2 year(s) after I leave the University, either by graduation or otherwise.

Date: Signature of Applicant