

We use the Federal and Institutional Methodologies to calculate the you cannot and does not guarantee financial aid. Financial Aid is offered at the discretion of the Financial Aid Director at the student's or parent's school of choice.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

List up to 5 schools that the student is considering

\_\_\_\_\_  
Complete School Name

\_\_\_\_\_  
School State

\_\_\_\_\_  
Complete School Name

\_\_\_\_\_  
School State

\_\_\_\_\_  
Complete School Name

\_\_\_\_\_  
School State

\_\_\_\_\_  
Complete School Name

\_\_\_\_\_  
School State

\_\_\_\_\_  
Complete School Name

\_\_\_\_\_  
School State

Try to complete this form with as much detail as possible so that we can provide you with realistic answers. However, if you don't have exact numbers then estimate

When completed

Fax or Scan and email to our office

Student

First Name: \_\_\_\_\_

Fathers Name: \_\_\_\_\_

Mothers Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Parent's E-mail \_\_\_\_\_

**If the student's birth parents are divorced  
please read the following.**

**This form should be completed in relation to the student's parent with whom the student resides at least 50% of the days of the student's senior year. Dependency status utilized on IRS forms is irrelevant.**

## Personal Information

	<b>Father Step/Father</b>	<b>Mother Step/Mother</b>
	Yes or No	Yes or No
Attend Workshop?		
Birth date	____	____
Work Phone	(____) ____	(____) ____
Work email	_____	_____

## Children's Information

Childs 1st Name	_____	_____	_____	_____	_____
Date of Birth	_____	_____	_____	_____	_____
College Start Yr.	_____	_____	_____	_____	_____
Your Dependent?	Yes or No	Yes or No	Yes or No	Yes or No	Yes or No
Gross Wage	\$_____	\$_____	\$_____	\$_____	\$_____
Int/Div Income	\$_____	\$_____	\$_____	\$_____	\$_____
Fed. Taxes Paid	\$_____	\$_____	\$_____	\$_____	\$_____
Assets (Excluding Tuition Plans)	\$_____	\$_____	\$_____	\$_____	\$_____
Pre-paid Tuition Plans (i.e. 529, TAP, UMGA, etc.)					
Total	\$_____	\$_____	\$_____	\$_____	\$_____
Other dependents claimed	_____				

## Income Information

Use Rounded Numbers

Adjusted Gross Income (Line 36 from 1040)*	\$ _____
Father/Step-Father Gross Wages*	\$ _____
Mother/Step-Mother Gross Wages*	\$ _____
Interest Dividend Income*	\$ _____
Annual Retirement Contribution*	\$ _____
Total Federal Taxes Paid (Line 56 from 1040)*	\$ _____
Planned monthly budget for college bill	\$ _____

### Other Income Information

(i.e. Child support received or paid, extraordinary business loss, Social Security, Disability, Extreme medical or dental costs)

\_\_\_\_\_  
\_\_\_\_\_

## Asset Information

Cash and Savings	\$ _____
Parents Investments (NON Retirement)	\$ _____
Retirement Investments	\$ _____
Net worth of Business or Farm	\$ _____
Cash/Investments to be used for College	\$ _____

### **Principal Residence**

Year Purchased	_____
Purchase Price	\$ _____
Current Value	\$ _____
Amount Owed (1 <sup>st</sup> , 2 <sup>nd</sup> Mortgage & Equity Line)	\$ _____
Mortgage Payment(s)	\$ _____
Remaining Term	\$ _____

### **Real Estate OTHER than Principal Residence**

Year Purchased	\$ _____
Purchase Price	\$ _____
Current Value	\$ _____
Amount Owed (1 <sup>st</sup> , 2 <sup>nd</sup> Mortgage & Equity Line)	\$ _____