

FINANCIAL DATA

(Please attach a copy of your ACT Financial Aid Need Estimator Report - if available)

Total Number of Family Members in Household (including yourself): _____

Number of Family Members in College during this year (including yourself): _____

Father's Employer: _____ Job Title: _____

Mother's Employer: _____ Job Title: _____

Anticipated College Expenses:

Estimated Family Contribution:

Tuition & Fees \$ _____

Parents' Contribution:
(from income and assets) \$ _____

Room & Board \$ _____

Student Contribution
(from job and/or savings) \$ _____

Books & Supplies \$ _____

Other (please list)
_____ \$ _____

Other (e.g. relatives; please specify)
_____ \$ _____

Total College Expenses: \$ _____

Total Family Contribution \$ _____

Have you applied for other forms of financial aid at this time? ___ yes ___ no

Have you received other forms of financial aid at this time? ___ yes ___ no

If yes, please indicate the type, amount and source:

		Source(s):
Scholarships	\$ _____	_____
Grants	\$ _____	_____
Loans	\$ _____	_____
Workstudy	\$ _____	_____
Other	\$ _____	_____

(Please forward a copy of any current or future financial aid received from any source)

Do you plan to work during the school year? _____

If there are special financial circumstances which will affect your education, please describe:

