



## Scholarship Request Form 2019

Student's Name \_\_\_\_\_

Last	First	Middle Initial
------	-------	----------------

The questions below give you the opportunity to provide us with information that will help us determine the need for financial assistance for your son/daughter to attend the Summer Experience at Cazenovia College. Scholarships will be based on financial need. They are limited and the awards are partial, five awards of \$500 are available.

The [Summer Experience registration form](#) must be completed prior to applying for a scholarship. Once you have completed the online registration, please print and complete this form. Please submit via email to [tkhodge@cazenovia.edu](mailto:tkhodge@cazenovia.edu) or fax at 315-655-6996. The deadline for receiving scholarship requests is **Friday, June 7, 2019.**

Complete the following. Please do not leave any blanks. Put "N/A" if the question is not applicable. Please use information from your most recent income tax return when available.

1. Father's/Stepfather's 2017 income from work (wages, salaries, tips, etc.).....\$ \_\_\_\_\_
2. Mother's/Stepmother's 2017 income from work (wages, salaries, tips, etc.)..... \$ \_\_\_\_\_
3. Parents' other 2017 taxable income (i.e. alimony received, business and farm income capital gains, interest, dividend income, pensions, annuities, rents, unemployment compensation, etc.).....\$ \_\_\_\_\_
4. Total taxable income (sum of 1, 2, and 3) ..... \$ \_\_\_\_\_
  
5. Parents' 2017 non-taxable income (i.e. Social Security benefits, earned income credit, IRA/KEOGH, Contributions, untaxed pensions, tax-exempt interest, Workers Compensation, AFDC benefits, etc.)..... \$ \_\_\_\_\_
6. Student's 2018 income..... \$ \_\_\_\_\_
7. Student's estimated 2019 income (January 1 – June 1)..... \$ \_\_\_\_\_
  
8. What do you believe is a reasonable amount that your family can contribute toward tuition, room, board? \$ \_\_\_\_\_

On the next page, please explain why you are requesting need-based scholarship and include any special circumstances that might assist us in making a decision.

I (we) certify that the information provided is accurate to the best of my (our) knowledge.

\_\_\_\_\_  
Signature of parent or guardian Date

\_\_\_\_\_  
Signature of parent or guardian Date

Please explain why you are requesting a need-based scholarship and any special circumstances that might assist us in making a decision:

---

---

---

---

---

---

---

---

---

---