

APPLICATION FOR FINANCIAL ASSISTANCE
for
MORRISSEY-COMPTON EDUCATIONAL CENTER, INC.

INSTRUCTIONS for COMPLETING the APPLICATION.

- 1) Submit the completed application answering each question completely and accurately along with as much detail as possible. This information will be held in strict confidence.
- 2) Attach copies of the most recent, current-year pay stub(s) showing gross pay and year-to-date deductions.
- 3) Complete and sign Form 4506 in the event that your tax records are needed to verify information.
- 4) If self-employed, attach **current** financial statements such as Profit and Loss and Income Statements.

Please provide as much documentation as possible. If there are extenuating circumstances or other factors you would like the committee to consider, please use the space provided at the end of this application or attach additional pages to explain.

STUDENT'S NAME:	_____
CURRENT ADDRESS:	_____
HOME TELEPHONE:	(_____) _____
STUDENT LIVES WITH: <small>(check one)</small>	Mother & Father, Mother, Father, Other (please explain):

	Preferred phone number to contact parent(s): _____
	Please provide name and EMAIL address for best contact regarding follow-up questions related to this application.

FATHER'S NAME: _____

EMPLOYER: _____ **HOW LONG EMPLOYED?** _____

POSITION: _____

BUSINESS ADDRESS: _____ **City, State, Zip** _____

MONTHLY GROSS SALARY: \$ _____ **NET:** \$ _____

MOTHER'S NAME: _____

EMPLOYER: _____ **HOW LONG EMPLOYED?** _____

POSITION: _____

BUSINESS ADDRESS: _____ **City, State, Zip** _____

MONTHLY GROSS SALARY: \$ _____ **NET:** \$ _____

PLEASE PROVIDE THE FOLLOWING INFORMATION: (please complete all questions)

Number of members in the household? (Include all adults and minors) _____

Ages of dependent children _____ Single parent household? (Y/N) _____

Please list the make, model and year of all transportation vehicles you have in your possession.

	Balance of amount owed	Fair Market Value
1.	\$ _____	\$ _____
2.	\$ _____	\$ _____
3.	\$ _____	\$ _____

INCOME - Per Month

List all sources of income, including any funds that may be provided by extended family, friends, income from property and/or investments, Child Support and/or Social Security payments.

Please list your average NET income per month:

TOTAL COMBINED SALARY(ies) \$ _____

INTEREST INCOME \$ _____

INCOME from INVESTMENTS \$ _____

CHILD SUPPORT (income) \$ _____

SUPPORT from FAMILY \$ _____

How much? _____
How often? _____

OTHER INCOME (please list) \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL INCOME per month \$ _____

EXPENSE - Per Month

List all expenses that apply, which occur each month

HOUSING (rent or mortgage(s)) \$ _____

UTILITIES \$ _____

(other than MORRISSEY-COMPTON) _____

What type of loan? _____

CREDIT CARD PAYMENTS \$ _____

Pay full bal. monthly? Yes NO

OTHER (please list) _____ \$ _____

_____ \$ _____

_____ \$ _____

Value of retirement account(s) \$ _____ Value of other investment(s) \$ _____ Balance in Savings acct(s)? _____

If you own your home, what is the estimated current value? _____ How long have you owned your home? _____

If you own your home, when did you last re-finance? _____ What is the balance of your home loan(s): \$ _____

If any adult member of the household is not employed, please explain what prevents you from being employed:

Can anyone from the extended family help with the expense for academic services? _____

Of the full cost for services, what portion do you estimate that you can pay? \$ _____

Please use this space for any additional information you wish to supply that has not been addressed that you wish to convey to the Financial Aid Committee (attach additional page(s) if necessary). Please keep this information factual and financial in nature.

Please type any additional information here:

I freely give my permission for an authorized representative of MORRISSEY-COMPTON to verify that the information provided in this form is true and can be substantiated through a review of my financial records.

By signing this application, I acknowledge the foregoing is true and accurate to the best of my knowledge. Falsifying information on this document may result in the immediate revocation of any funding by MORRISSEY-COMPTON EDUCATIONAL CENTER.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____