



Financial Aid Application

To be submitted with your regular application materials by July 1, 2011 for priority decisions.

✓ Eligibility

- a. Financial aid is income based
 - i. Criteria for income eligibility follows the US Department of Health and Human Services Poverty Guidelines at 300% of the 2010 rates
 - ii. First come first served basis

✓ Process

- a. Complete the required application forms and the financial aid forms in their entirety and attached required documentation of income
 - i. Documentation: please include your family's 2010 tax return. If your 2010 tax return is unavailable, you may substitute one of the following: pay stubs, government assistance (Social Security, TANF, unemployment check stubs), child support documents or retirement or pension income
- b. Your eligibility is confirmed by a financial aid committee
- c. Notice is sent via email or mail to you and your parent prior to the start of My Chicago with instructions on how to accept the financial aid award if offered
- d. All decisions will be made no later than June 30, 2011

FORM: Financial Aid

Applicant Name

Date of Birth

Parent / Guardian Name

Street Address

Zip Code

Phone

Email

Additional persons in household aside from parent/guardian and student:

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Annual Household Income Total: _____ # in Household: _____

Verification:

I have attached my family's 2010 tax return: YES NO

If you have NOT attached a tax return, please check which of the following documents is included as a substitute:

- Last two pay stubs
- Social Security (SSI)
- Unemployment check stubs
- Retirement /pension income
- Child support
- Welfare / TANF stub

Please describe any special circumstances that should be taken into consideration when reviewing your application for financial assistance:

(You may attach additional pages if necessary)

I certify that the statements above are true and correct:

Parent Signature

Date

Office use only:

Reviewed by: _____ Date: _____

Scholarship granted: YES NO Award Amount: _____

Decision Information Sent: _____ To: Parent Student Balance: _____