



American Planning Association

Making Great Communities Happen

Financial Aid Application 2012-2013 Academic Year

Please indicate which Scholarship Program you are applying for:

(A copy of this form must accompany each completed scholarship application)

APA Judith McManus Price Scholarship

Charles Abrams Scholarship

Please type or print.

1. Name (circle one – Ms. Mr.)

2. Contact Information

Permanent

Street address

City, State ZIP

Home phone: Work Phone: Cell Phone:

* E-mail

School (if different than above)

Street address

City, State ZIP

Home phone Work Phone

* E-mail

3. United States Citizenship (required) ____ I am a Citizen of the United States.

4. Marital Status ____Married ____Single ____Separated ____Divorced ____Widowed

a. Number and age of dependents: _____

b. Relationship to dependents: _____

5. Family Resources (Questions 6 and 7 need not be answered by self-supporting students)

Father's Occupation _____

Annual Net Income _____

Mother's Occupation _____

Annual Net Income _____

6. Please list all persons dependent upon family for financial support.

Name	Age	College/Occupation	Percent Support Rec'd From Family
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_____	_____	_____	_____
_____	_____	_____	_____

7. Outstanding Loans (List all creditors, amount, date due and relation to creditor)

_____	_____	_____	_____
_____	_____	_____	_____

8. Estimated Student Budget (for 12-month period beginning June 1)

Expenses	Academic Year	Balance of Year
Tuition & Fees	\$ _____	\$ _____
Living & Personal Expenses:		
Books, course materials	\$ _____	\$ _____
Apartment/room rent/mortgage	\$ _____	\$ _____
Food or board	\$ _____	\$ _____
Utilities, furnishings	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Laundry, dry cleaning	\$ _____	\$ _____
Social, misc.	\$ _____	\$ _____
Transportation to school (includes auto expenses)	\$ _____	\$ _____
Other essential items:	\$ _____	\$ _____
Subtotals (Add each column)	\$ _____	\$ _____
TOTAL EXPENSES (combine subtotals)		\$ _____

Income	
Accumulated Savings:	\$ _____
Cash in Bank	\$ _____
Stocks/bonds, etc.	\$ _____
Anticipated summer earnings	\$ _____
Anticipated earned income during academic year	\$ _____
Net expected after tax contribution from spouse's resources or earnings	\$ _____
Aid from relatives/friends (loans & gifts)	\$ _____
Federal or state loans	\$ _____

Other scholarships	\$ _____
Other gift awards or outright grants	\$ _____
Other income: (example - trust funds)	\$ _____
TOTAL INCOME	\$ _____
Anticipated gap between Expenses & Income	\$ _____

9. Statement of Financial Independence (optional) If a student wishes to declare financial independence, a notarized statement is required and should be attached to this application certifying that the student will not be taken as a tax deduction by the parent(s) in the year(s) for which the scholarship is sought, and that the student will receive no financial aid from the parent(s). Use of IRS tax-reporting documents/copies is acceptable, provided they clearly show financial independence.

10. Certification

I have examined the above statements and certify that to the best of my knowledge and belief, they are a full, true and accurate statement of the facts.

Signature of Applicant _____

Date _____

Applicants

Please be sure you have attached all required materials.

See Application Check List, page 4 of the Program information.

Completed application must be received at the address below by April 30th.

If forwarded via FEDEX or similar courier service, material must arrive by April 30th.

Faxed or e-mailed documents will not be accepted.

Mail completed application packet to:

APA Scholarship Program
 c/o American Planning Association
 Kriss Blank, Leadership Affairs Associate
 205 N. Michigan Ave., Suite #1200
 Chicago, IL 60601
kblank@planning.org

