



**American Planning Association**

*Making Great Communities Happen*

# Financial Aid Application

2009-2010 Academic Year

**Please indicate which Scholarship Program you are applying for:**

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

- APA Fellowship Program**
- APA Judith McManus Price Scholarship**
- Charles Abrams Scholarship**

Please type or print.

**1. Name** (circle one – Ms. Mr.)

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**2. Contact Information**

**Permanent**

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Street address

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City, State ZIP

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Home phone:                      Work Phone:                      Cell Phone:

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\* E-mail

**School (if different than above)**

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Street address

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City, State ZIP

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Home phone                      Work Phone

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6. 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 \_\_\_\_\_

**7. Please list all persons dependent upon family for financial support.**

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

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

<u>Expenses</u>	<b>Academic Year</b>	<b>Balance of Year</b>
Tuition & Fees	\$ _____	\$ _____
Living & Personal Expenses:		
Books, course materials	\$ _____	\$ _____
Apartment/room rent	\$ _____	\$ _____
Food or board	\$ _____	\$ _____
Utilities, furnishings	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Laundry, dry cleaning	\$ _____	\$ _____
Social, misc.	\$ _____	\$ _____
Transportation to school	\$ _____	\$ _____
Other essential items:	\$ _____	\$ _____
 Subtotals (Add each column)	\$ _____	\$ _____
 <b>TOTAL EXPENSES</b> (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	\$ _____
<b>TOTAL INCOME</b>	\$ _____
<b>Anticipated gap between Expenses &amp; Income</b>	\$ _____

**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  
 122 S. Michigan Ave., Suite 1600  
 Chicago, IL 60603-6107  
[kblank@planning.org](mailto:kblank@planning.org)