

# FINANCIAL AID APPLICATION

Please answer all questions below. If you are of legal age and self-supporting, you need not fill out sections referring to parents or guardians. If you are under 21 or partially supported by a parent or guardian, these sections must be completed and their signatures included. All information is confidential.

- Attach an explanation of your financial need. Note any circumstances that you would like Outward Bound to consider.
- Attach a copy of your (or your parent/guardian's) most recent 1040 tax form
- Attach a letter of motivation
- Call 866-467-7651 to complete application and submit \$95 fee

## APPLICANT

Name \_\_\_\_\_  
Last First Middle

Permanent Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City State Zip  
 Phone: Day ( \_\_\_\_ ) \_\_\_\_\_ Evening ( \_\_\_\_ ) \_\_\_\_\_

Course Applied For \_\_\_\_\_

Social Security Number \_\_\_\_\_

E-mail \_\_\_\_\_

Age \_\_\_\_ Sex \_\_\_\_ Marital Status \_\_\_\_\_

School or Employer \_\_\_\_\_

Street Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City State Zip

- A. Have you lived or will you live with your parent(s) for at least six weeks...  
 in the past 12 months?  Yes  No  
 in the next 12 months?  Yes  No
- B. Did or will your parent(s) claim you on...  
 last year's tax return?  Yes  No  
 this year's tax return?  Yes  No
- C. Did or will your parent(s) give you more than \$1,000 support...  
 last year?  Yes  No  
 this year?  Yes  No
- D. List the types and amounts of any outstanding loans.  
 \_\_\_\_\_  
 \_\_\_\_\_

I am an Outward Bound alumnus  Yes  No

## PARENTS OR GUARDIANS (if applicant is under 21)

Name \_\_\_\_\_  
Last First Middle

Street Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City State Zip  
 Phone: Day ( \_\_\_\_ ) \_\_\_\_\_ Evening ( \_\_\_\_ ) \_\_\_\_\_

Occupation, Employer \_\_\_\_\_

Marital Status of Parent/Guardian \_\_\_\_\_

2nd Parent/Guardian Name \_\_\_\_\_  
Last First Middle

Street Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City State Zip  
 Phone: Day ( \_\_\_\_ ) \_\_\_\_\_ Evening ( \_\_\_\_ ) \_\_\_\_\_

Occupation, Employer \_\_\_\_\_

## INCOME INFORMATION

	Parents/Guardians	Applicant/Spouse
<b>Annual Income</b>		
Salary Before Taxes	_____	_____
Other Income (Interest, dividends)	_____	_____
Support	_____	_____
<b>Total</b>	_____	_____
<b>Expenses</b>		
Living Expenses	_____	_____
Other Annual Bills	_____	_____
<b>Total</b>	_____	_____
<b>Net income</b> (total income minus total expenses)		
_____	_____	_____
<b>Assets</b>		
Cash on Hand and in Accounts	_____	_____
Real Estate Value	_____	_____
Investments Value	_____	_____
Other Assets	_____	_____
Auto (year/model)	_____	_____
Auto (year/model)	_____	_____
<b>Total</b>	_____	_____
<b>Debts</b>		
Mortgages	_____	_____
Bank Loans & Credit Cards	_____	_____
Auto (year/model)	_____	_____
Auto (year/model)	_____	_____
<b>Total</b>	_____	_____
<b>Net Worth</b> (total assets minus total debts)		
_____	_____	_____

## CHILDREN IN YOUR FAMILY

Name	Age	School/College	Your Annual School Cost	Amount Educ. Aid Received
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## STUDENT'S ESTIMATE OF NEED

\$ \_\_\_\_\_ Course Tuition

\$ \_\_\_\_\_ Amount I Can Provide

\$ \_\_\_\_\_ Amount of Aid from Other Sources

\$ \_\_\_\_\_ Net Amount Needed as Financial Aid

I (We) declare that the information provided is true and complete.  
 I (We) have enclosed a copy of my (our) 1040 tax form(s).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(if applicant is under 21)