

FINANCIAL AID APPLICATION

“THEOLOGY AFTER HOURS”

PERSONAL INFORMATION

Title (Mark one): BR. DR. FR. MR. MRS. MS. REV. SR.

Last Name					First Name		
Title of Congregation or Diocese if Religious or Priest							
<i>Members of religious congregations should supply the Financial Aid Office with documentation of your need or that of your community (for example, a letter from the bursar of your community).</i>							
Address							
City		State		Zip			
Home Phone				Cell Phone			
E-mail Address				Work Phone			
Date of birth							

For the 20____ - 20____ Academic Year, my financial aid should be awarded based on the following enrollment status:

Master of Theological Studies:

Non-degree/Special Student:

Fall Registration 20 ____

Spring Registration 20 ____

FINANCIAL RESOURCES

If actual figures are not available, please make estimates to the best of your ability.

INCOME		
	Student	Spouse
2010 Adjusted Gross Income	\$ _____	\$ _____
EXPECTED INCOME <i>(Expected Year= June 1, 2010 - May 31, 2011)</i>		
Expected Year Taxable Gross Income	\$ _____	\$ _____

COMMENTS / EXPLANATION
In the space below please explain any additional circumstances you believe are important for us to know in evaluating your application.

FEDERAL INCOME TAX RETURN
Your award will not be official until a copy of your income tax return for the past year is received in the Financial Aid Office of the Jesuit School of Theology. If you did not file a federal tax return for the past year, please give a brief explanation.

I hereby acknowledge that the information submitted herewith is true and correct.

Applicant Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____