



ITHACA COLLEGE

Summer PreCollege Program

FINANCIAL AID REQUEST FORM - 2018

Student's name _____
(please print) Last First Middle

Student's social Security number _____

This form gives you the opportunity to provide information to help us evaluate the need for financial assistance for your son/daughter to attend the Summer College for High School Students, or the Ithaca Writers Institute. Because these are optional summer programs, financial aid is very limited. Financial aid awards are always partial scholarships. Full scholarships are not provided. Our goal is to help those students most likely to be receiving financial aid when they apply to a four-year college program.

Please print this form and send it via email to to summercollege@ithaca.edu or fax to: 866-924-6272.

Complete numbers 1-8, even if the answer is zero. Don't leave them blank. Put "N/A" if not applicable. Please use information from your most recent income tax return when available. Please estimate if these numbers are not yet available.

Father's/Stepfather's 2016 income from work (i.e. wages, salaries, tips, etc.).....	\$ _____
Mother's/Stepmother's 2016 income from work (i.e. wages, salaries, tips, etc.)	\$ _____
Parents' other 2016 taxable income (i.e. alimony received, business and farm income, capital gains, interest, dividend income, pensions, annuities, rents, unemployment compensation, etc.)	\$ _____
Total taxable income (sum of 1-3)	\$ _____
Parents' 2016 non-taxable income (i.e. social security benefits, earned income credit, IRA/KEOGH contributions, untaxed pensions, tax-exempt interest, Workers Compensation, AFDC benefits, etc.).....	\$ _____
Student's 2016 income.....	\$ _____
Student's estimated income from January 1 to July 1, 2017.....	\$ _____

What do you believe is a reasonable amount that your family can contribute toward tuition, room, board . \$ _____

To which summer program are you applying? _____

On the next page of this form below, please explain why you are requesting need-based aid and any special circumstances that might assist us in making a decision. We may request copies of tax returns be submitted to support this application. Note: Merit-based aid is not available during the summer, although it is available to qualified Ithaca College students during the regular academic year.

I (we) certify that the information provided is accurate to the best of my (our) knowledge.

Signature of parent or guardian

Date

Signature of parent or guardian

Date

Please explain why you are requesting need-based aid and any special circumstances that might assist us in making a decision:

Upload to Campminder or E-mail as a scanned PDF to:
Summer College & STEM applicants:
summercollege@ithaca.edu

Ithaca Writers Institute applicants: iwi@ithaca.edu

Piano Institute applicants: pianoinstitute@ithaca.edu

Or return by fax to 866-924-6272

PLEASE REMEMBER TO INCLUDE YOUR FIRST AND LAST NAME ON EACH PAGE OF YOUR CORRESPONDENCE.

*Please contact the Office of Extended Studies with questions at 607-274-3143
or email summercollege@ithaca.edu or iwi@ithaca.edu*