



Confidential Form for Leadership Anne Arundel Scholarship

The information you provide below will help to accurately assess your financial need and make an allocation based on both need and available resources. To be considered for financial aid all questions must be answered. All information you provide remains confidential.

Name:

Company: _____ Position: _____

Daytime Phone: _____ Email: _____

1. Please state why you believe you should be granted tuition assistance. Use additional paper if necessary.

2. Your income/salary:

\$25,000 or under \$40,001-\$55,000 \$70,001-\$85,000
 \$25,001-\$40,000 \$55,001-\$70,000 \$85,001 and over

3. I have sought partial tuition from other companies/organizations and civic leaders in my local area. Yes No
4. Anticipated sources of support for tuition (check all that apply):
 Employer Community Organization
 Church Self Other
5. Other Sources of Support:
 Spouse Investments
 Partner Trust Fund Other.
Approximate Amount per year: \$ _____
6. Family: Number of dependents and ages: _____
7. Amount of Assistance Sought (this question MUST be answered):
What is the amount you are requesting? \$ _____
What amount will your employer/sponsor contribute? \$ _____
How much will you personally contribute? \$ _____
8. I have asked my employer/sponsor to support my Leadership Anne Arundel tuition, but my employer or sponsor organization is unable to provide this support.
9. Yes No
9. Are you employed by a non-profit organization?
 Yes No
10. If your answer to #9 is “yes,” then please select one of the following:
 Small (budget less than \$250,000)
 Medium (budget between \$250,001-\$600,000)
 Large (budget of more than \$600,000)
11. If financial assistance is not available will you be able to participate in Leadership Anne Arundel?
 Yes No
12. A payment plan is available in which the tuition is paid over an extended period of time. Twenty-five percent (25%) is due by August 1 of the program year, with the remainder paid by April 1. Are you requesting this option?
 Yes No

13. Describe any special circumstances that should be considered in your request for tuition assistance. Use additional paper if necessary.

Signature: _____ **Date:** _____