

## SAGE Financial Hardship Scholarship Application 2010

*NOTE: All information provided will be held strictly confidentially. It will be viewed only by the members of the SAGE Scholarship Committee in compliance with all privacy protection rules of UNLV and the State of Nevada, and only to quantify financial support required to attend the SAGE Academy 2010.*

Student's name (last, first)	Social Security #
Street	City, ZIP
daytime phone	evening phone
e-mail	<u>current</u> high school and year in school

- I. Would you be able to attend SAGE without any financial assistance? \_\_\_\_\_
- II. Would you be able to attend SAGE with a partial (half) scholarship? \_\_\_\_\_

### PERSONAL FINANCIAL INFORMATION

- III. List your four largest monthly expenses:

item	cost per month
_____	_____
_____	_____
_____	_____
_____	_____

- IV. Are you currently responsible for supporting family members or others? If so, list the persons and amount of monetary support per month:

family member/other person	support per month
_____	_____
_____	_____
_____	_____
_____	_____

## SAGE Financial Hardship Application, Continued

V. List the following information for each job you currently hold:

place of employment	hours per week	\$ earned per week
_____	_____	_____
_____	_____	_____
_____	_____	_____

VI. What is your current total balance of cash, savings and checking accounts? \$ \_\_\_\_\_  
 (provide either a bank statement, letter from financial advisor or parents with account numbers obscured)

VII. What is the current net worth of your investments? \$ \_\_\_\_\_  
 (provide statement from investment company, financial advisor or parents with account numbers obscured)

### FAMILY FINANCIAL INFORMATION

VIII. Are your parents: a) married b) divorced c) separated d) other \_\_\_\_\_  
 (circle one)

IX. With whom do you currently live: a) both parents b) one parent c) step-parent d) other \_\_\_\_\_  
 (circle one)

X. How many people are in your immediate family, including parents, brothers and sisters? \_\_\_\_\_

XI. List primary job, with company name, for the following persons, if applicable. If unemployed, note this and provide most recent job. If employed at home, list type of home-based business:

	type of employment (job title)	place of employment
Father	_____	_____
Mother	_____	_____
Legal Guardian _____ (if not parents as listed above)	_____	_____

XII. Who of the above provides your principal financial support? Circle that person or write another person here, with place of employment: \_\_\_\_\_

XIII. What is the total balance of cash, savings and checking accounts for the person circled? \$ \_\_\_\_\_  
 (provide either a bank statement, letter from financial advisor or parents with account numbers obscured)

XIV. What is the current net worth of the investments of the person you identified? \$ \_\_\_\_\_  
 (provide statement from investment company, financial advisor or parents with account numbers obscured)

## **UNLV SAGE Academy, Summer 2010 FINANCIAL HARDSHIP SCHOLARSHIP INSTRUCTIONS**

*To make sure your application is processed successfully, here are a few helpful tips. Please contact SAGE at any time if you have any questions at (702) 895-2265 or [sage.academy@unlv.edu](mailto:sage.academy@unlv.edu).*

- The application for SAGE admission and the scholarship form are separate documents. This document is the application for a financial hardship scholarship.
- Your scholarship application consists of the following:
  - Pages 1 and 2 of the above Form
  - Supporting documentation for Questions VI, VII, XIII and XIV, if applicable
- Mail your application and supporting documents to the address below. You will receive e-mail confirmation when your scholarship forms are complete:

**SAGE Scholarship Committee  
UNLV Honors College  
4505 S. Maryland Parkway Box 7003  
Las Vegas, NV 89154-7003**