

Garden Clubs of Illinois, Inc.

FINANCIAL AID FORM

Anticipated Sources of Funds: Please use the following form to show all (including scholarships other than anticipated one from GCI), assistantships, educational insurance policies, etc. as well as all projected costs involved for attending college in the current school year. It is not required that projected resources and expenditures balance.

Note: If financial information is not available before the application deadline, information from the previous academic year may be used with the notation that it is an estimate based on the previous year.

This form must be completed and SIGNED by both the Financial Aid Officer and by the student making the application.

- **ALL** questions on the form must be answered since actual financial need is one of the determining factors in the awarding of scholarships.
- The student and Financial Aid Officer will determine how the money will be spent: tuition, food, housing, books, etc.
- The student must mail this form, along with other required application materials, to the GCI Scholarship Chairman. The address is on the application form.

ANTICIPATED RESOURCES

_____ From parent or relative
_____ From personal savings
_____ Educational Insurance Policies
_____ School-year earnings
_____ Grants/Scholarships
_____ Loans
_____ Other:

_____ Total Funds Available

PROJECTED EXPENDITURES

_____ Tuition and Fees
_____ Housing
_____ Board
_____ Books/Supplies
_____ Clothing/Laundry
_____ Transportation
_____ Other:

_____ Total Expenses

FINANCIAL AID OFFICER:

Is this student eligible for receiving financial aid at your institution?

Grants/Scholarships: Yes _____ No _____

Student Loans: Yes _____ No _____

Has this student applied for financial aid at your institution? Yes _____ No _____

FINANCIAL AID OFFICER'S SIGNATURE _____

PRINTED NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ FAX _____ DATE _____

This information will be held in the strictest confidence. It will be made available only to appropriate officials of the college/university and to the members of GCI Scholarship Committee.

THIS WILL AUTHORIZE THE RELEASE OF MY FINANCIAL NEED FORM TO THE GARDEN CLUBS OF ILLINOIS, INC.

Student Signature _____ Date _____