



**FINANCIAL ASSISTANCE FORM**

**ADDITIONAL FINANCIAL INFORMATION:**

*Check all that apply*

- Loss of job
- Recent separation/divorce
- Bankruptcy
- Change in work status
- Illness or injury
- Income increase/reduction
- Medical/Dental expenses
- Child Support (recv'd or paid)
- Alimony (recv'd or paid)
- Education expenses other than for the applicant

Please explain the financial impact of each of the items you checked:

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List individual(s) who resided with you at least 50% of the time last year and/or for whom you provided at least 50% of their support:

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**INCOME REPORTING**

Filing status (check one):

- I filed a tax return for 2008
- I did not file a tax return for 2008

Other Income:

- Social Security
- TANF
- Food Stamps
- Other (please name)

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Do you have income that was not reported on your 2008 tax return?

Yes    No

If yes, what is the amount and the source of the income?

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The Pathways to Success Scholarship Committee may request additional information if it is unable to determine a scholarship award based on the 2008 Federal Tax return and other financial documents provided.

**OTHER FINANCIAL RESOURCES**

Does the applicant have a parent who does not live with him/her?

Yes                       No

Have you contacted this parent to make a contribution toward the applicant's educational expenses?    Yes                       No

If yes, indicate the amount of the contribution on **Page 3 Line 2.**

If no, may we contact this parent (please provide name, address and telephone number)?

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What is the estimated annual income of this parent?

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**PATHWAYS BOARDING & DAY SCHOLARSHIP CONTRACT**

\_\_\_\_\_ has applied for scholarship to attend a Pathways Partner school.

**Student Name**

as a student for the 2009-2010 academic year. To receive this scholarship, Pathways Scholarship award recipients must:

1. Remain in 'good' standing (academically and socially) with the school and Pathways. The school determines what constitutes 'good' standing.
2. Be aware that only one status change (transfer, withdraw, day/boarding) may be allowed in the life of the scholarship.
3. Agree to take part in periodic evaluations (brief interviews & surveys) of the boarding and/or day school experience.
4. Authorize *Pathways* to use their name and photograph in newsletters and other promotional material.

School Year:

- Jr. Pathway students (7<sup>th</sup> & 8<sup>th</sup> graders regardless of age) must work 12.5 hours/month (12.5 x 8 months = 100 hours)
- 14 and 15 year old students must work 22.5 hours/month (22.5 X 8 months = 180 hours).
- Students 16 and older must work 45 hours/month (45 X 8 months = 360 hours)
- 15 year-old students who turn 16 before September 1, 2009 must work 360 hours. For students who turn 16 on or after September 1, 2009 the required hours will be 180.

Summer Hours:

- Jr. Pathways student (7<sup>th</sup> & 8 graders) must work an additional 120 community service hours for summer 2010 for a total of 220 hours before school begins in 2010-11.
- 14 and 15 year old students must work an additional 200 hours for summer 2010 for a total of 380 hours before school begins in 2010-2011
- 16 years old students must work an additional 320 hours for summer 2010 for a total of 680 hours before school begins again in 2010-2011.

**I authorize the Pathways Partner School to release academic and work records for the above mentioned student to the *Pathways to Success* program.**

**I also understand that I am required to keep track of and submit summer work hours directly to the Pathways Partner School.**

**Scholarship payments will only be released to the school if the required work hours have been met and received in the Commonweal Foundation office.**

**As an indication of your understanding of the above requirements and your dedication to fulfilling your obligations, please sign and return a copy of this contract to the Pathways Partner School.**

\_\_\_\_\_  
Student's Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Pathways Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Pathways Partner School Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Commonweal Foundation Representative

\_\_\_\_\_  
Date