NEED-BASED SCHOLARSHIP INFORMATION

(There are a limited number of Need-Based Scholarships available for those who qualify.)

******Please read the following information carefully ---Application and letter of request must be returned to the
Governor's School Office, along with record of benefits by
April 14, 2023, to be considered for this scholarship either by
mail: GSFTA, 1301 E. Main St., Box 38, Murfreesboro, TN
37132 or via email gjrobins@mtsu.edu.

2023 Governor's School for the Arts Financial Aid Checklist for Need-Based Scholarship

You will need to have the following on hand to complete the application. Please only return the requested information as directed.

- Letter of Request (Return to School Office)
- Application (Return to School Office)
- 2022 Fed. Income Tax Return (Do Not Send)
 IRS 1040, 1040A, 1040EZ
- 2022 W-2, recent pay stub (Do Not Send)
- 2022 untaxed income records (Do Not Send)
 Child support received, worker's compensation
- Current Bank Balance (Do Not Send)
 Checking, Savings, Other
- Record of benefits received from any of the Federal Programs listed below: (Return to School Office)

Supplemental Security Income (SSI)

Food Stamps

Temporary Assistance for Needy Families (TANF)

Special Supplemental Nutrition Program for Women, Infants & Children (WIC)

^{*}Note: Need-based scholarship awards will be determined based on the information provided in the application and supporting documentation if required.

Letter of Request for Need-based Scholarship Assistance

(Please Print)

I/we are applying for a Need-based Scholarship in the amoun	t of \$ for ou
son/daughter to attend the 2023 Governor's School for the A	rts program. I/we would like to be
considered for financial assistance for theProgram Cost	Activity Fee Both.
Name of Children	
Name of Student:	
Name(s) of Parent:	
Mailing Address or P.O. Box:	
City:	Zip Code:
Primary Phone Number:()	
Secondary Phone Number:()	
Email Address:	
What is the student's family's approximate annual household	lincome? \$
What is the amount the family can contribute to the cost of t	he program? \$
Please write a short narrative of any information that might be financial need? (optional)	pe pertinent in the consideration of
Signature of Parent(s)	 Date

APPLICATION FOR NEED-BASED SCHOLARSHIP ASSISTANCE

PLEASE PRINT 1. Name of Student: ______ 2. Name of Mother: _____ Place of Employment: _____ Wk. Phone No.: ____ 3. Name of Father: _____ Place of Employment: _____ Wk. Phone No.: ____ 4. How many people live in your household? (include parents, children only) 5. In 2022 did anyone in the household receive benefits from any of the following Federal programs listed? (Check all that apply) ____ Supplemental Security Income (SSI) Food Stamps ____ Temporary Assistance for Needy Families (TANF) Special Supplemental Nutrition Program for Women, Infants & Children (WIC) 6. What income tax return did you file or will file for 2022? ____ IRS 1040 ____ IRS 1040A ____ IRS 1040EZ ____ A foreign tax return Did not file ____ Other: _____ 7. What was your Adjusted Gross Income (AGI) for 2022? \$ (Located on IRS Form 1040 – line 37; Form 1040A – line 21; Form 1040EZ – line 4) (Located on IRS Form 1040 – line 55; Form 1040A – line35; Form 1040EZ – line 10) 8. Enter your exemptions for 2022: _____ (Found on Form 1040 – line 6d; Form 1040A – line 6d.) 9. How much did each parent earn from working in 2022? Mother: \$______ Father: \$_____ 10. As of today, what are your current monthly expenses? \$ By signing this application you agree, if required, to provide information that will verify the accuracy of the information on this form.

Date

Signature(s)