***BARBARA MURPHY BROOKS***

***WOMEN’S STUDIES SCHOLARSHIP***

East Tennessee State University

**Personal Financial Statement Form**

**Name**

**Address**

**City/State/Zip**

**Home Phone**

**Cell/Work Phone**

**Classification**

**PROJECTED EXPENSES**

**for**

**ACADEMIC YEAR \_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **Expenses** | | | |
| **Estimated Tuition Expenses** | **$** | |  |
| **Other Related School Expenses**  (Please itemize below) | **$** | |
| 1. $  2. $  3. $  4. $  5. $ | | | |
| ***TOTAL Amount of Estimated Expenses:*** | **$** |  | |

|  |  |
| --- | --- |
| **Funding Resources** | |
| **Projected Scholarship Awards**  (Please list below) | **$** |
| □ Personal Loan $  □ RSWP Student Work Position $  □ Grant $  □ APS Scholarship $  □ Other (Please explain.) $ | |
| **Projected Assistance from Other Funding Sources**  (Please list below) | **$** |
| □ Personal Loan $  □ RSWP Student Work Position $  □ Grant $  □ APS Scholarship $  □ Other (Please explain.) $ | |
| ***TOTAL Amount Anticipated from Funding Sources*** | **$** |

|  |  |
| --- | --- |
| ***TOTAL Amount of Need:***  Estimated Expenses minus (-) Anticipated Funding.  This amount should reflect the financial need for school-related expenses that are not covered. | **$** |

|  |
| --- |
| **Financial Need Narrative** |
| Provide below any information you think may help us to get a clear picture of your financial need. Consider the following: To what extent do you financially support yourself? Do you pay for all or some portion of: school-related costs, including tuition and supplies? Rent/housing costs? Other living expenses? Please be specific. Are you on your own? Are you a parent, single-parent, or guardian? Do you have elder care or disability expenses? In what way does your family situation affect your financial aid? Feel free to include other information you feel is pertinent. Attach a separate sheet if needed. |
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