

# KROKA EXPEDITIONS SEMESTER PROGRAMS

Where Consciousness Meets Wilderness

## Instructions for Completing Scholarship Application

1. Please type or print neatly in ink. (*PLEASE DO NOT USE PENCIL OR FELT PEN*).
2. All financial information needs to be calculated on an **annual** basis (*not* monthly). This includes expenses reported for last year (2009) and financial projections for the coming year (2010/11).
3. Applications must be returned, along with a copy of your signed 2009 tax return, complete with all schedules, attachments, W-2's and 1099's, to Kroka Expeditions. If you own a business, you must submit a business or corporate tax return as well.
4. If parents are divorced, both parents are required to submit an application form. If a non-custodial parent is not legally obligated to provide payment for education, she/he must submit the non-custodial application with a legal documentation stating such. Without both forms, applications cannot be processed. Signatures of both parents are required.
6. Scholarship awards will be made two to three weeks after submission.

## Kroka Expeditions Scholarship Policy

The amount of scholarship awarded is up to 30% of the full tuition and is determined on the basis of financial need. In the case of divorced families, each parent must submit a completed application form. The Scholarship Committee will consider the assets of both natural parents, if living, and/or step-parents, depending on individual circumstances.

The teachers of the semester programs do not make decisions about recipients or amounts of financial aid awarded. The decision is made solely by the Scholarship Committee, whose members are associated with the school.

## Scholarship Application

### 2010-2011

### Household Information

Student Name: \_\_\_\_\_

Student's Address: \_\_\_\_\_

Father or Guardian  
Name: \_\_\_\_\_

Mother or Guardian  
Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(if different than above)  
Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
(if different than above)  
Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Position: \_\_\_\_\_

Years with Firm: \_\_\_\_\_

Years with Firm: \_\_\_\_\_

Check any that may apply:

\_\_\_\_ Parents Separated  
\_\_\_\_ Legal Guardian

\_\_\_\_ Parents Divorced  
\_\_\_\_ Head of Household unable to work

\_\_\_\_ Parent Deceased

Please list all persons, beginning with yourself, residing in your household between January 1, 2010 and January 31, 2010. List each person's relationship to you (child, step-child, spouse, partner, etc.). Also list ages of children and which schools they are attending.

<u>Name</u>	<u>Relationship</u>	<u>Child's Age</u>	<u>Child's Grade In Fall 2009</u>	<u>School attending In Fall 2009</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**We request a scholarship in the amount of: \$** \_\_\_\_\_

Maximum scholarship amount is 30% of total tuition of \$12,000 NHESP and \$13,000 NHVSP

# Confidential Financial Statement

## Annual Family Expenses January 1 – December 31, 2009

(Please note: All amounts must be listed in annual totals.)

Itemized Household Expense

Mortgage or Rent: \$ \_\_\_\_\_  
 Property Tax (if not incl. above): \$ \_\_\_\_\_  
 Federal Taxes: \$ \_\_\_\_\_  
 Social Security Tax: \$ \_\_\_\_\_  
 Insurance Premiums:  
 Homeowners (if not included in  
 Mortgage): \$ \_\_\_\_\_  
 Renters: \$ \_\_\_\_\_  
 Auto: \$ \_\_\_\_\_  
 Life: \$ \_\_\_\_\_  
 Medical/Health  
 (your portion): \$ \_\_\_\_\_  
 Catastrophic: \$ \_\_\_\_\_  
 Other: \$ \_\_\_\_\_  
 Total Insurance Premiums: \$ \_\_\_\_\_  
 Electricity: \$ \_\_\_\_\_  
 Heat: \$ \_\_\_\_\_  
 Gas: \$ \_\_\_\_\_  
 Water/Sewer: \$ \_\_\_\_\_  
 Child Support Payments: \$ \_\_\_\_\_  
 Alimony Payments: \$ \_\_\_\_\_  
 Medical/Dental Expenses  
 (not covered by insurance) \$ \_\_\_\_\_  
 Food: \$ \_\_\_\_\_  
 Education: Kroka semester \$ \_\_\_\_\_  
 Education: Other \$ \_\_\_\_\_  
 Childcare: \$ \_\_\_\_\_  
 Phone: \$ \_\_\_\_\_  
 Clothing: \$ \_\_\_\_\_  
 Car Maintenance: \$ \_\_\_\_\_  
 Other, please list: \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
**Total Household Expenses 2009:** \$ \_\_\_\_\_

Loan and Credit Card Expenses 2009

**Secured Loans (educational, auto, etc.):**

Type of Loan \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_  
 Due Date of final payment \_\_\_\_\_

Type of Loan \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_  
 Due Date of final payment \_\_\_\_\_

Type of Loan \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_  
 Due Date of final payment \_\_\_\_\_

**Unsecured Loans (personal, etc.):**

Type of Loan \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_  
 Due Date of final payment \_\_\_\_\_

Type of Loan \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_  
 Due Date of final payment \_\_\_\_\_

**Credit Card Debt:**

Creditor: \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_

Creditor: \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_

Creditor: \_\_\_\_\_  
 Outstanding Balance \$ \_\_\_\_\_  
 Total Paid in 2009 \$ \_\_\_\_\_

**Total Loan/Credit Payments 2009:** \$ \_\_\_\_\_

(Please attach another page if necessary.)

# PROJECTED ANNUAL FAMILY EXPENSES

## JANUARY 1 – DECEMBER 31, 2010

### Itemized Household Expense

Mortgage or Rent: \$ \_\_\_\_\_  
 Property Tax (if not incl. above): \$ \_\_\_\_\_  
 Federal Taxes: \$ \_\_\_\_\_  
 Social Security Tax: \$ \_\_\_\_\_  
 Insurance Premiums:  
 Homeowners (if not included in  
 Mortgage): \$ \_\_\_\_\_  
 Renters: \$ \_\_\_\_\_  
 Auto: \$ \_\_\_\_\_  
 Life: \$ \_\_\_\_\_  
 Medical/Health  
 (your portion): \$ \_\_\_\_\_  
 Catastrophic: \$ \_\_\_\_\_  
 Other: \$ \_\_\_\_\_  
 Total Insurance Premiums: \$ \_\_\_\_\_  
 Electricity: \$ \_\_\_\_\_  
 Heat: \$ \_\_\_\_\_  
 Gas: \$ \_\_\_\_\_  
 Water/Sewer: \$ \_\_\_\_\_  
 Child Support Payments: \$ \_\_\_\_\_  
 Alimony Payments: \$ \_\_\_\_\_  
 Medical/Dental Expenses  
 (not covered by insurance) \$ \_\_\_\_\_  
 Food: \$ \_\_\_\_\_  
 Education: Krokia \$ \_\_\_\_\_  
 Education: Other \$ \_\_\_\_\_  
 Childcare: \$ \_\_\_\_\_  
 Phone: \$ \_\_\_\_\_  
 Clothing: \$ \_\_\_\_\_  
 Car Maintenance: \$ \_\_\_\_\_  
 Other, please list: \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
**Total Projected**  
**Household Expenses 2010:** \$ \_\_\_\_\_

Please explain any unusual expenses that the Committee should be aware of. If additional space is needed, please continue on another page.

### Loan and Credit Card Expenses 2010

**Secured Loans (educational, auto, etc.):**  
 Type of Loan \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
 Type of Loan \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
 Type of Loan \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
**Unsecured Loans (personal, etc.):**  
 Type of Loan \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
 Type of Loan \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
**Credit Card Debt:**  
 Creditor: \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
 Creditor: \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
 Creditor: \_\_\_\_\_  
 Projected annual expense \$ \_\_\_\_\_  
  
**Total Projected**  
**Loan & Credit Payments 2010:** \$ \_\_\_\_\_

## Projected Annual Family Income 2010

Father's Earnings: \$ _____ Interest & Dividends _____ Alimony Income _____ Child Support _____ Other Income _____ (rent subsidy, welfare, food stamps, etc.)	Mother's Earnings: \$ _____ Interest & Dividends _____ Alimony Income _____ Child Support _____ Other Income _____ (rent subsidy, welfare, food stamps, etc.)	Other Adult Living in Household Earnings: \$ _____ Interest & Dividends _____ Alimony Income _____ Child Support _____ Other Income _____ (rent subsidy, welfare, food stamps, etc.)
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Total Projected Annual Family Income: \$ \_\_\_\_\_

- Are there any other sources of income that your family has access to for tuition? (for example, grandparent support, trust or educational fund, etc.) \_\_\_\_\_ YES \_\_\_\_\_ NO
- If so what are these sources? \_\_\_\_\_
- What amount is available to your family from these sources? \_\_\_\_\_

Please explain any adjustments to income that the Committee should be aware of. If additional space is needed, please continue on another page.

## Assets & Liabilities

**Present Value of Assets**

Residence: \$ \_\_\_\_\_  
 Other Real Estate: \$ \_\_\_\_\_  
 Investments  
 (incl. 401K, IRA): \$ \_\_\_\_\_  
 Savings: \$ \_\_\_\_\_

Autos (list make & year):  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

If you own a business,  
 value of ownership: \$ \_\_\_\_\_  
 Other Assets: \$ \_\_\_\_\_

Total Assets (+) \$ \_\_\_\_\_

**Liabilities**

Residential Mortgage  
 (outstanding balance): \$ \_\_\_\_\_  
 Other Mortgages: \$ \_\_\_\_\_  
 Secured Loans  
 (listed on p. 4 & 5): \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

Unsecured Loans  
 (listed on p. 4 & 5): \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

Credit Card Debt  
 (listed on p. 4 & 5): \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

Other Loans/Debts: \$ \_\_\_\_\_

Total Liabilities (-) \$ \_\_\_\_\_

Net Worth  
 (Assets minus Liabilities) \$ \_\_\_\_\_

The undersigned state that all information contained herein is complete and accurate to the best of their knowledge. This information is for the confidential use of Kroka Expeditions only.

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Signature Date



