

## KROKA EXPEDITIONS INDEPENDENT ADULT FINANCIAL AID FORM

KRO	KA EXPEL	DITIONS INDEPENDENT ADULT FINANCIAL AID FORM	5/11
Registration Information Please take your time and print legibly. Thank You!	Student's Full Name:		
	Program Name:	Program Start Date:	
Typically this means the (a) have not been claid (b) have not received	at during the <b>p</b> imed as a dep more than \$1,	S WHO ARE FINANCIALLY INDEPENDENT ADULTS: brior and current calendar year you bendent on someone else's tax return - AND - 000 in financial support from any family members - AND - ving expenses and educational expenses through your own savings or employment	
Dear prospective student: Kroka Expeditions is committee making our programs availab to any student who has a de	ole ep	Kroka's <b>regular TUITION</b> for this program (or programs) (When applicable, use the appropriate sliding scale tuition based on your annual income)	
desire and interest in attending Information on this form will be kept confidential and restrictionly to those members of the	e ed	MAXIMUM AMOUNT that I can pay towards this tuition (if I really stretch):	
Kroka scholarship committee  Decisions will be made within two weeks of receiving your completed application.  Your deposit will be refunded you are not satisfied with you award.	aif 4	Financial support from friends & family:	
		Fiinancial support from other local SCHOOL or COMMUNITY SCHOLARSHIP PROGRAMS:	
	5	REQUEST: Amount I am requesting from the Kroka Scholarship Fund:	
What have been your prir	mary sources of	income / savings during the past year?:	
		r annual living expenses during the past n and major expenses: i.e. rent, health insur-	
What has been the estimate (please list schools attended)	,	r annual educational expenses during the past year?	
Please supply as much a complete picture of your		ation as possible to provide a on:	
		nal space on the back of this page, or attach a separate page if you would like.  T ATTACH A COPY OF YOUR MOST RECENT IRS TAX FORM 1040	

Kroka Expeditions 767 Forest Road Marlow, NH 03456 Telephone: (603) 835-9087 Fax: (866) 795-4973 www.kroka.org office@kroka.org

Reviewed by

Date Received

FOR OFFICE USE ONLY:

Offered

Finalized

Suggested Award