

# **2022/2023 STUDENT APPLICATION FOR FINANCIAL ASSISTANCE**

## **(SCA) MANHASSET SCHOOL COMMUNITY ASSOCIATION EDUCATIONAL GRANTS**

## **(MSAA) MANHASSET STUDENT AID ASSOCIATION GRANTS AND LOANS**

You may use this application for both the SCA and/or MSAA assistance  
(please submit a separate copy to each organization to addresses below)

### **In order for your application to be considered please submit:**

- A fully completed application form with all required documentation by May 22, 2022.
- A copy of the Financial Aid letter from the institution you will be attending in 2022-2023.
- A copy of your SAR (Student Aid Report) based on your FAFSA submission.
- Demonstrate financial need
- To be considered for:
  - SCA Grant: You must be a graduate of Manhasset High School
  - MSAA Grant/Loan: You must reside in Manhasset and be a Legal Resident

Please note that if you are applying to both the Manhasset SCA **and** to the MSAA organizations, you will need to send each organization a copy of your application. Your application is reviewed individually by each group. Monetary awards are not affected if you apply to both. This application was combined so that students can to apply to both organizations by completing and photocopying the application.

**I am submitting this application for: \_\_SCA Grant \_\_MSAA Grant/Loan**

### **SCA Educational Grants MSAA Application**

c/o Ruth Geismar

115 Shore Road

Manhasset, NY 11030

scaeducationalgrants@gmail.com

c/o Maureen Lavin

Manhasset, NY 11030

msaaselection@gmail.com

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

Permanent

Address: \_\_\_\_\_ Home

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email

Address: \_\_\_\_\_ Date

of Birth: \_\_\_\_\_ Social Security # \_\_\_\_\_ High

School: \_\_\_\_\_ Date of HS Graduation \_\_\_\_\_ US Citizen Y/N GPA: \_\_\_\_\_

Returning applicants - please include a copy of your college transcript

Name and Address of School You Plan to Attend: \_\_\_\_\_

\_\_\_\_\_  
-

What are your career objectives? \_\_\_\_\_

\_\_\_\_\_

**Work Experience**

Employment Dates Employer City/State Hours/Week Total Income \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Did you complete and submit a  
CSS Profile? Y/N

**Sources of Financial Aid**

**Type Amount** • College Grant \_\_\_\_\_ • FSEOG (Federal Supplemental Educational  
Opportunity Grant) \_\_\_\_\_ • PELL Grant \_\_\_\_\_ • TAP (NY Tuition Assistance Program)  
\_\_\_\_\_ • Applying for Excelsior Scholarship? Y/N

• Subsidized Stafford Loan \_\_\_\_\_ • Unsubsidized Stafford Loan \_\_\_\_\_ • Guaranteed  
Student Loan Program (Bank Loan) \_\_\_\_\_

• NYHEAC (NY Higher Education Assistance Program) \_\_\_\_\_ • College Work/Study  
Program \_\_\_\_\_ • Other Sources (please specify below) \_\_\_\_\_

**Estimated Expenses and Resources**

**Expenses Resources**

Tuition \_\_\_\_\_ Family/Relatives \_\_\_\_\_ Room \_\_\_\_\_ Student  
Savings \_\_\_\_\_ Board \_\_\_\_\_ Summer Job \_\_\_\_\_ Extra  
Fees \_\_\_\_\_ Work/Study \_\_\_\_\_ Books \_\_\_\_\_  
Grants/Scholarships \_\_\_\_\_ Travel Expenses \_\_\_\_\_ Educational Loans \_\_\_\_\_  
TOTAL EXPENSES: \_\_\_\_\_ TOTAL RESOURCES: \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HERewith IS ACCURATE & CORRECT. I AGREE TO PROVIDE ANY OFFICIAL DOCUMENTATION NECESSARY TO VERIFY THE ABOVE INFORMATION. THE SCA/MSAA SELECTION COMMITTEE HAS MY AUTHORIZATION AND CONSENT TO MEET WITH REPRESENTATIVES OF MY HIGH SCHOOL'S GUIDANCE OFFICE TO DISCUSS AND REVIEW THIS APPLICATION.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT STUDENT NAME: \_\_\_\_\_

**Parent/Guardian Information**

**Father/Guardian Mother/Guardian Non-Custodial Parent (if applicable)**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_

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

Dependent Children (other than applicant)

Age: \_\_\_\_\_ School level/occupation: \_\_\_\_\_

Age: \_\_\_\_\_ School level/occupation: \_\_\_\_\_

Age: \_\_\_\_\_ School level/occupation: \_\_\_\_\_

Other dependents (please

explain): \_\_\_\_\_  
\_\_\_\_\_

**Parents/Guardians \*Non-Custodial Parent (if applicable)** Rent or own home \_\_\_\_\_  
\_\_\_\_\_

Market Value of home \_\_\_\_\_

Own other property \_\_\_\_\_

Please be specific \_\_\_\_\_

IRS Adjusted Gross Income \_\_\_\_\_ Other

income \_\_\_\_\_ Total debts

(other than mortgage) \_\_\_\_\_ Amount

Non-Custodial Parent is required to contribute towards applicant's education? \_\_\_\_\_ From

SAR report, what is your EFC? \_\_\_\_\_

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Parent/Guardian Signatures: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**PERSONAL STATEMENT:** If you wish, please attach a separate sheet to explain briefly any other circumstances that have a bearing on the applicant's need for financial aid

\*Please note: a non-custodial parent may copy and submit page 3 separately.

