

NEW YORK STUDIO SCHOOL

OF DRAWING, PAINTING & SCULPTURE

8 West 8th Street, New York, NY 10011 T 212.673.6466 F 212.777.0996 www.nyss.org

2017-2018 APPLICATION FOR FINANCIAL AID

Fill out the form completely and concisely. Only completed applications will be accepted and processed. The School may request additional documentation to verify the information reported and such requests should be addressed promptly. The need for the additional documentation will be determined by Student Services upon review of this application. Scholarships/financial aid only covers tuition expenses and the student is expected to cover any additional fees. Deadlines are *February 15th* for Fall and Spring and *October 1st* for Spring only.

Semester: Fall 2017+Spring 2018 Fall 2017 Only Spring 2018 Only **Program of Study:** MFA Certificate

Are you: A US Citizen? A US Permanent Resident? An International Student?

A. Background Information

Name:

TITLE	LAST NAME/FAMILY NAME	FIRST NAME/GIVEN NAME	MIDDLE NAME
DATE OF BIRTH (MONTH/DAY/YEAR)		U.S. SOCIAL SECURITY NUMBER (IF APPLICABLE)	

Local Address:

STREET		APT NO.		
CITY	STATE	ZIP CODE	COUNTRY	TELEPHONE

Permanent Address: (if the same as above, please leave blank)

STREET		APT NO.		
CITY	STATE	ZIP CODE	COUNTRY	TELEPHONE

Please list all forms of financial aid which you received in 2016-2017 from the New York Studio School:

NAME	TYPE OF FUNDING (SCHOLARSHIP OR WORK-STUDY)	YEARLY AMOUNT
		\$
		\$
		\$
TOTAL		\$

B. Your Finances

ATTACH A COPY OF YOUR (AND YOUR SPOUSE'S) 2016 FEDERAL INCOME TAX RETURN AND ALL SCHEDULES.

1. Your (and Your Spouse's) 2016 total income

- from employment \$ _____
- from sales of your art \$ _____
- from interest or dividends \$ _____
- from a trust fund \$ _____
- from parents or relatives \$ _____
- from spouse or live-in companion \$ _____
- from any other sources of income (specify) \$ _____

TOTAL \$ _____

2. Your (and Your Spouse's) 2017 expected income

- from employment \$ _____
- from sales of your art \$ _____
- from interest or dividends \$ _____
- from a trust fund \$ _____
- from parents or relatives \$ _____
- from a spouse or live-in companion \$ _____
- from any other sources of income (specify) \$ _____

TOTAL \$ _____

3. Your (and Your Spouse's) Assets as of 2/15/17

- Checking, savings, other bank accounts \$ _____
- Stocks, bonds, other securities \$ _____
- Home, co-op, other real estate \$ _____
- Automobile (blue book value) List make/year of auto _____ \$ _____
- Trust fund of which you are the beneficiary \$ _____
- Retirement Funds (IRA, 401K, Keough, etc.) \$ _____
- Other important assets \$ _____

TOTAL \$ _____

4. Your (and Your Spouse's) Debts

- Loans (please list) _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- Mortgage \$ _____
- Other significant debts \$ _____

TOTAL \$ _____

5. Do you live

- alone? Yes No
- with your parents? Yes No
- with your spouse? Yes No
- with one or more person? Yes No

If yes, please list how many people you live with _____

What is the amount of your monthly rent/mortgage? \$ _____

What percentage of the entire rent is the amount above? _____%

(DOMESTIC APPLICANTS ONLY)
IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS, SKIP SECTION C:

- Were you born before January 1, 1993? Yes No
- As of today, are you married and living with your spouse? Yes No
- Are both of your parents deceased? Yes No
- Do you have dependents who receive more than half of their support from you? Yes No
- If so, please list their age(s) 1. _____ 2. _____ 3. _____
- On your tax returns, you classify yourself as Head of Household/Independent Yes No

C. Your Parent(s)

IF YOU DID NOT ANSWER YES TO ANY OF THE QUESTIONS AT THE END OF SECTION B, YOU MUST ATTACH A COPY OF YOUR PARENTS' 2016 FEDERAL INCOME TAX RETURN OR ATTACH THE EXTENSION FORM WITH A COPY OF THEIR 2015 FEDERAL INCOME TAX RETURN.

INTERNATIONAL STUDENTS WHOSE PARENTS PROVIDE AT LEAST HALF OF DOCUMENTED SUPPORT MUST ATTACH PARENTS' INCOME TAX FOR 2016. ALL SUBMITTED DOCUMENTATION MUST BE TRANSLATED IN ENGLISH.

1. Your parents' current marital status Single Married/remarried Widowed
 Separated Divorced

If separated or divorced, attach 2016 Federal Income Tax Return (or equivalent for F-1 Students) from parent in whom you received 50% or more of support.

2. Your parents' state or country of legal residence _____
3. Number of other children or dependents living with your parents? _____
4. Number of children in college (including yourself at the New York Studio School): _____
5. What is the age of your oldest parent? _____
6. Parent's 2016 Income (U.S. dollars with the exchange rate as of today)
- | | |
|-------------------|----------|
| -Wages and Salary | \$ _____ |
| -Interest Income | \$ _____ |
| -Dividends | \$ _____ |
| -Other Income | \$ _____ |

TOTAL \$ _____

7. **Asset Information for Parents as of today**
- | | |
|-------------------------------------|----------|
| -Cash, Savings and Checking Account | \$ _____ |
| -Real estate | |
| -Current Value | \$ _____ |
| -Mortgage | \$ _____ |
| -Securities (stocks, bonds) | \$ _____ |
| -Trust Fund | \$ _____ |
| -Farm | \$ _____ |

TOTAL \$ _____

8. **Provide the Asset Information for Your Non-custodial Parent**
- | | |
|-------------------------------------|----------|
| -Cash, Savings and Checking Account | \$ _____ |
| -Real estate | |
| Current Value | \$ _____ |
| Mortgage | \$ _____ |
| -Securities (stocks, bonds) | \$ _____ |
| -Trust Fund | \$ _____ |
| -Farm | \$ _____ |

TOTAL \$ _____

D. Additional Information

List or describe any other financial or economic circumstances you wish to be considered.

F. Signatures

All of the information provided by me on this form, or in connection with this application for financial aid, is true and complete to the best of my knowledge. All people giving information on this form must sign and date below.

STUDENT SIGNATURE

DATE

PRINTED NAME

SPOUSE SIGNATURE

DATE

PRINTED NAME

PARENT OR GUARDIAN SIGNATURE

DATE

PRINTED NAME

PARENT OR GUARDIAN SIGNATURE

DATE

PRINTED NAME

The New York Studio School agrees to use the information provided herein solely for purposes of granting financial aid and related activities.

G. LCU Foundation Housing Assistance (FEMALES ONLY)

In order to be eligible for housing assistance from the LCU Foundation, you must be a female MFA candidate, and be able to make the following representations. If you meet these qualifications and would like to be considered for such housing assistance, please sign below.

I hereby represent that last year I did not receive, and this year I do not expect to receive, more than \$30,000 in gross earned or other income. I further represent that last year I received, and this year I expect to receive, little or no financial assistance from parents, spouse, siblings and/or other friends and/or relatives. I realize that the continuing accuracy of the foregoing representations is a condition precedent to my receipt of any housing assistance from the LCU Foundation; accordingly, in the event I receive such housing assistance, I promise to promptly notify the New York Studio School (in writing) if the foregoing representations become inaccurate.

SIGNATURE