MONTEREY COLLEGE OF LAW SCHOLARSHIP / STUDYSHIP APPLICATION

NAME:		CLASS YEAR:	1 2 3 4 (circle one)
ADDRESS:		SSN:	
CITY:	ZIP:	DATE OF BIRTH:	
HOME PHONE:	GENDER: M F	WORK PHONE:	
MARITAL STATUS (CIRCLE ONE): SIN	NGLE MARRIED		DOMESTIC PARTNER
<u>DEPENDENTS:</u> Name	Age	Relationsh	nip
	<u> </u>		
	<u>—</u>		
			
OTHER PEOPLE FOR WHOM YOU PROVID	E SUPPORT:		
Name	Amount		Relationship
		· -	
		· -	
		<u>-</u>	
CURRENT EMPLOYMENT: Employer	Hrs / Week		Length of Time with Employer
		-	

NARRATIVE:

Attach a narrative which discusses the scholarship(s) for which you believe you qualify, why you believe you are a good candidate for that scholarship, and any extraordinary family and personal needs that will support your application. If the information on your tax returns differs significantly from your current financial situation, or if you expect your financial picture to change, please also explain that in your statement.

STUDENT'S PERSONAL FINANCIAL STATEMENT

These next two pages consist of personal financial information relating to you, your spouse/partner and/or dependents. Please review each line and complete the information that pertains to you. If the section does not pertain to you, please mark it with "n/a".

NOTE: Assets/Liabilities are amounts that are current today. Income/Expenses are amounts that reflect that which you have earned/spent in the last 12 months.

ASSETS		LIABILITIE	
(Amounts as of Today)		(Amounts as of	Гoday)
LIQUID:		Please list <u>entire</u> amount owed.	
Cash - Checking	\$	Real Estate Loan(s):	<u></u>
Cash - Savings Stocks and Bonds	\$ \$ \$	a. b.	\$ \$
Life Insurance (cash surrender value) Subtotal Liquid Assets	\$ \$		
•		Automobile Loan(s):	
Real Estate (Market Value)	\$	la.	\$
Vested Interest/Retirement Fund	\$ \$] b.	\$ \$ \$
Vehicles owned:] c.	\$
<u>Make</u> <u>Year</u>	<u>Value</u>	d.	\$
a.	\$]	
b.	\$ \$ \$ \$	Revolving Charge Acct(s) (pleas	se itemize):
c.	\$] a.	\$
d.	-] b.	\$
Subtotal Value/Vehicles	s: \$] c.	\$
Other Assets (please itemize):		d.	\$
a.	\$]	
b.	\$	Other Liabilities (please itemize	r):
c.	\$ \$ \$ \$	a. MCL Note Payable (TIP)	\$
d.	\$] b.	\$
		c.	\$ \$
		d.	
Total Assets:	\$	Total Liabilities:	\$
]	

INCOME		EXPENSES	
(Please list amounts for last 1. and <u>before</u> taxes.)	2 months	(Please list total spent in	ı last 12 months.)
Employment Income - Student Employment Income - Spouse MCL Scholarship(s) Awarded Dividends / Interest Spousal/Child Support	\$ \$ \$ \$	Mortgage or Rent All income taxes Property Taxes Insurance Premiums Utilities / Telephone	\$ \$ \$ \$ \$ \$
Rental Income Veteran's Benefits Disability Income Unemployment Benefits	\$ \$ \$ \$ \$ \$ \$	Food Clothing Personal Services: (laundry, cleaning, etc.)	\$
Pensions Inheritance Parent Contribution Other income (Please itemize):	\$ \$ \$	Child care expenses Child/Spousal Support Child school costs MCL Expenses	\$ \$ \$
a. b. c.	\$ \$ \$	Transportation: Loan, Insurance, Reg. Fee Gas and maintenance Entertainment	\$ \$ \$
Total Income:	\$	Medical / Dental Other Expenses: a. b. c. Total Expenses:	\$ \$ \$ \$
Total Income:	Φ	Total Expenses:	φ

All of the information on this application is true and complete to the best of my knowledge.
I have attached a verification of my year-to-date payroll earnings and a copy of my most recently
filed tax form(s) complete with schedules and support forms.

Date	Applicant's Signature