

CharterCARE Foundation Financial Aid Worksheet

APPLICANT NAME:

Cost of education per year:

EXPENSES

Tuition and Fees

Room and Board

Books and Supplies

Transportation

Amount

Total

TOTAL EXPENSES

 A

INCOME

Name of Grant or Scholarship

Federal, State and Other

Awards (list loans and work study in Loan section below)

College Grants and

Scholarships (list loans and work study in Loan section below)

TOTAL GRANTS AND SCHOLARSHIPS

 B

Expected Family Contribution (EFC) from Student Aid Report (SAR)

 C

TOTAL INCOME (Item B plus Item C)

 D

Financial Need (Item A minus Item D)

 E

LOANS AND WORK STUDY

Name of Source

TOTAL LOANS AND WORK STUDY

Do you have any unusual personal, financial or family circumstances that warrant special attention by the selection committee? Please be specific.