



STUDENTS AND TEACHERS AS RESEARCH SCIENTISTS

2012 FINANCIAL AID APPLICATION
DEADLINE: MUST be submitted with Student Application (preferably typed by the student)

I. A. Applicant's Name: _____
Last First Middle

B. Home Address: _____ Phone: _____
Street City, State, Zip Code

Name of High School: _____ Grade this Fall: _____

School Address: _____
Street City, State, Zip Code

II. 1. At what monetary level are you seeking financial aid for the program this summer? _____

2. Do you currently hold a job? Yes No Salary / week \$ _____

3. Employer: _____ Phone: _____

Address: _____

How many hours per week do you work now? _____

4. Do you have a job lined up for summer? Yes No Salary / week \$ _____

Employer: _____ Phone: _____

Address: _____

How many hours per week do you need to work this summer? _____

5. Is the work mandatory for financial reasons? Yes No If so, how much do you expect to net? \$ _____

6. Would your need for a job prevent you from attending the STARS program? Yes No

7. Please state specifically why you are applying for aid and give your reason for the need (use another page if necessary).

Student Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____