

Berks Deaf and Hard of Hearing Services

Margaret Roeder Scholarship

Statement of Financial Need

Name: _____

Address: _____

Phone #: _____ Email Address: _____

Have you applied for financial aid for the 2010-2011 academic year? _____Yes _____No

Do you believe you will qualify for financial aid for the 2010-2011 academic year?
_____Yes _____No

Please list all financial aid and amounts received during the 2010-2011 academic year, if any:

Please list all scholarships and their amounts received during the 2010-2011 academic year, if any:

Please list all scholarships and their amounts you expect to receive during the 2009-2010 academic year, if any:

Please discuss any factors that make your financial need greater than normal (medical expenses, financial commitments, etc.):

The above statements are true and correct to the best of my knowledge, and I give consent to release information concerning my academic and/or financial status to Berks Deaf and Hard of Hearing Services.

Signature

Date

Statement of Financial Need must also be turned in by the scholarship deadline date for the student's application to be considered.