



## 2020-2021 Scholarships Application

These scholarships are for financial assistance only and limited to students attending California Northstate University. The scholarships are directly credited to the recipient's California Northstate University tuition account. Immediate family members of the Northern California Education Foundation board members and executive officers are ineligible to apply. Winners are expected to be present at the awards ceremony to receive the award.

Please fill out the application using a word processor and submit the application electronically in one PDF file to [NCEF.CNSU@gmail.com](mailto:NCEF.CNSU@gmail.com)

**MISSING INFORMATION OR LATE APPLICATIONS WILL NOT BE ACCEPTED/REVIEWED.**

_____	_____	_____		
Last Name	Middle Name	First Name		
_____	( ) _____	_____		
Student ID#	Cell Phone	<b>CNU Email Address</b>		
_____	_____	_____	_____	_____
Current Address	City	State	Zip Code	
_____	_____	_____	_____	
Permanent Address	City	State	Zip Code	
Graduation Year _____	Current GPA or Honors _____			
School of Pharmacy ( )	School of Medicine ( )	School of Health Science ( )		
School of Psychology ( )	School of Graduate Studies ( )			

Please scan all documents and combine into one PDF file. Email to [NCEF.CNSU@gmail.com](mailto:NCEF.CNSU@gmail.com)  
**Application deadline: 5:00 PM, January 15, 2021.**

Files to include in the following order:

Personal statement describing need for financial aid (one page)

Passport quality photo

Most recent CNU Academic Transcript

**Supplemental Financial Aid Application (copies of): 2019 W4, 2019 W2, latest statement on all loans (with current balance listed), latest rent agreement or mortgage statement. If you are being supported by your parent(s), please provide the above-listed documents under their name.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## Supplemental Financial Aid Application

1. Applicant must provide a copy of all financial documents (i.e. pay stubs, tax returns, etc. listed from page one of the application) that support the applicant's financial need.
2. List all other grants or scholarships, including dollar amount, received while attending CNU.
3. Note: The following Sections 1 and 2 are summary. You must provide documentation requested, in addition to the summary.

### Section 1. Income:

Are you currently working? Yes \_\_\_ No \_\_\_ Hours per week \_\_\_\_\_

Please tell us about your job - title, duty, etc.

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#### Personal Income:

Total monthly income \$ \_\_\_\_\_

Annual income \$ \_\_\_\_\_

#### Spouse / Partner

Total monthly income \$ \_\_\_\_\_

Annual income \$ \_\_\_\_\_

#### Total combined household

Total monthly income \$ \_\_\_\_\_

Annual income \$ \_\_\_\_\_

#### Investment Income

Total monthly income \$ \_\_\_\_\_

Annual income \$ \_\_\_\_\_

#### Supplemental Security Income (SSI) assistance or unemployment income

Total monthly income \$ \_\_\_\_\_

Annual income \$ \_\_\_\_\_

#### Other income (Parent / Family)

Annual income \$ \_\_\_\_\_

Total annual income \$ \_\_\_\_\_

**Section 2. Financial Liability:**

Please list each loan separately. Enter remaining balance only. Not total amount.

_____ Name of the loan	_____ Balance Remaining	_____ Annual Payment
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