

Summer Academic Program for Elementary School Students
(SAPESS)
Financial Aid Scholarship 2018

Financial Aid Application 2018

1. We do receive a large number of financial aid scholarship applications. Since there is a limit to the number of scholarships available, we recommend that you submit your application as soon as possible. The Deadline for scholarship applications is Friday, April 6th, at 5:00 P.M.
2. Please refer to the criteria below for eligibility requirements and the list of the supporting documents needed. Incomplete applications will not be considered.
3. Type or print legibly.
4. You will be notified regarding the status of your application.
5. If you do not receive a scholarship you can choose to participate in the program by submitting the fee of \$725. (\$740 after April 6th.) If you are unable to pay the full amount at the time of registration, you will need to submit a nonrefundable deposit of \$75.
6. If you have any questions about the application process, please contact us at sapess2@csun.edu or call us at 818-677-4886.

Purpose of Scholarships: The Summer Academic Program for Elementary School Students (SAPESS) serves elementary schools in the area surrounding the California State University campus in Northridge. Each year SAPESS determines how many scholarships to offer based upon a percentage of enrollment. In the last three summers, approximately 70 students have attended SAPESS on scholarships. The goal of SAPESS is to grow students in their academics, personal character, and to give them an enhanced sense of courage to pursue their unique talents and interests. Because the University does not subsidize SAPESS, it is financially self-supporting. SAPESS, therefore, provides opportunities for families to apply for scholarships.

Scholarship Awards: The program fee for 2018 is \$725. Financial Aid Scholarships are given in the amount of 50% of program fee (\$362.50). All elective fees will be the responsibility of the family.

Award Criteria:

1. Applicant must be a registered student of SAPESS.
2. Applicant must be a CA resident.
3. Applicant must show proof of financial eligibility.

Application Process - Completed applications will include the following:

1. "2018 Application Form".
2. "Letter of Application Intent"
3. "Statement of Accuracy"
4. Copy of the most recent Report Card (Grade Report).
5. A copy of the family's **2017** Federal 1040A tax return for the members of the household. If you do not file Federal and State tax returns, you need to list your total income for 2017. Families eligible for financial aid must make less than \$35,000 a year in combined taxable income.
6. The SAPESS Coordinator must sign the completed application. The parent/ guardian may sign the application at home and return the completed application to CSUN's address below, or may submit the completed application in person. Please make an appointment to turn in the completed application.

Jill Frieze
SAPESS
California State University, Northridge
18111 Nordhoff Street
Northridge, CA 91330-8265

Email: sapess2@csun.edu
Phone: 818-677-4886

SAPCESS Scholarship 2018

2018 Application Form

Please **type** or **print** your answers clearly.

A separate application must be turned in for each dependent applying for a SAPCESS scholarship.

| | | |
|----|--|---------------------|
| 1. | Student: First and Last Name | |
| 2. | Parent: First and Last Name | |
| 3. | Parent E-mail Address | |
| 4. | I certify I am a CA resident | YES NO |
| 5. | Current School enrolled in | |
| 6. | Grade in the Fall 2018 | Circle: K 1 2 3 4 5 |

| | |
|----|--|
| 7. | <p>A. The following items must be included with this application in order for the application to qualify to be reviewed by the scholarship committee.</p> <p>B. Your application will be returned to you if these items are not attached.</p> <p>C. Circle 'YES' or 'NO' to be sure you have included each item as required.</p> |
|----|--|

| | | |
|-----|----|---|
| YES | NO | "2018 Application Form" |
| YES | NO | "Letter of Application Intent" |
| YES | NO | "Statement of Accuracy" signed |
| YES | NO | Copy of most recent Report Card (Grade Report) |
| YES | NO | Copy of your family's 2017 Federal 1040A Tax Return |

SAPCESS Scholarship 2018

Letter of Application Intent

Name of Student _____

Name of Parent(s) _____

Address _____

City _____ Zip Code _____

Home Phone () _____

E-Mail _____

Has student attended SAPCESS in the past? _____

If yes, indicate the year(s) attended: _____

Reasons for requesting partial scholarship (provide as much detail as possible):

Parent's Signature _____

Date _____

SAPCESS Scholarship 2018

Statement of Accuracy

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge.

I hereby understand that if I am chosen as a partial scholarship winner, according to the policy, I need to submit the tuition payment in the amount of \$362.50. If I do not receive a scholarship, I have the option to participate in the program by submitting \$725. (\$740 after April 6th)

Signature of Applicant: _____

Signature of Parent or Guardian: _____

Date: _____

Signature of SAPCESS Administrators:

Completed Application Received on: _____

Completed Application Verified by: _____

Jill Frieze _____
SAPCESS Coordinator

Phil Shaffer _____
SAPCESS Consultant