

**APPLICANT INFORMATION**

NSAF CODE \_\_\_\_\_  
(NSAF USE ONLY)

Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Telephone: Home \_\_\_\_\_  
CITY STATE ZIP Cell \_\_\_\_\_

Personal E-Mail Address **REQUIRED** \_\_\_\_\_

Father's Name \_\_\_\_\_  
Father's Home Address \_\_\_\_\_ Email: \_\_\_\_\_  
Own \_\_\_\_\_ Rent \_\_\_\_\_ Telephone: Home \_\_\_\_\_  
CITY STATE ZIP Cell \_\_\_\_\_

Father's Occupation \_\_\_\_\_  
Father's Firm & City \_\_\_\_\_

Mother's Name \_\_\_\_\_  
Mother's Home Address \_\_\_\_\_ Email: \_\_\_\_\_  
Own \_\_\_\_\_ Rent \_\_\_\_\_ Telephone: Home \_\_\_\_\_  
CITY STATE ZIP Cell \_\_\_\_\_

Mother's Occupation \_\_\_\_\_  
Mother's Firm & City \_\_\_\_\_

Closest Relative Other Than Parent Who Does Not Live With You:  
Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ Email: \_\_\_\_\_  
Telephone: Home \_\_\_\_\_  
CITY STATE ZIP Cell \_\_\_\_\_

How Did You Hear About NSAF? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION BY APPLICANT**

I certify that the information given herein, and which you are authorized to verify, is true and correct; that the funds for which this application is made are necessary to enable me to pursue my education and will be used solely for that purpose; and I agree to notify NSAF of any material change in the facts. Furthermore, I authorize NSAF to obtain from the school in which I am enrolled, such additional information as NSAF may require as to my enrollment status. This application will remain the property of NSAF, Inc., whether the loan be approved or rejected. I fully understand my obligations incurred by the acceptance of this loan.

**I certify that the applicant is currently a resident of Newington, Connecticut and has resided in Newington continuously for the past eighteen (18) or more months.**

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

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_  
(If Applicant is 18 Years Old or Under)

**FINANCIAL INFORMATION**

NSAF CODE \_\_\_\_\_  
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**School Information**

I plan to attend (School name) \_\_\_\_\_  
Address/City/State \_\_\_\_\_  
School year beginning (Month/Year) \_\_\_\_\_  
I expect to graduate (Month/Year) \_\_\_\_\_

**School Costs**

Indicate your anticipated annual costs for the school year

TUITION & FEES \$ \_\_\_\_\_ ROOM & BOARD \$ \_\_\_\_\_

**Available Resources**

**Annual Adjusted Gross Family Income From All Sources (Check Appropriate Figure):**

Under \$20,000                      \$20,000 - \$40,000                      \$40,000 - \$60,000  
\$60,000 - \$80,000                      \$80,000 - \$100,000                      \$100,000 - \$125,000  
\$125,000 - \$150,000                      Over \$150,000

**List jobs that you expect to earn money from during the summer and through the school year.**

Employer                                      Type of Work                                      Expected Earnings

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I expect to receive the following financial aid: (Include scholarships, grants, social security, and/or loans)**

Financial Aid Grantor                                      Amount Granted or Expected

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OTHER INFORMATION**

Are your parents? Married \_\_\_\_\_ Divorced/Separated \_\_\_\_\_ Widowed \_\_\_\_\_

Other (Please Explain) \_\_\_\_\_

**List all siblings and others dependent upon your parents for support (No Names!)**

Relationship                      Age                      School                      \$/YR                      % of Parental Support

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attach an additional page to indicate any other relevant information which  
can assist the NSAF Loan Committee.**