

**The River Academic eXchange
Request for Support**



Name	Phone
Address	Email
City, State, Zip	

PART 1. ALL HOUSEHOLD MEMBERS			
Names of all household members, including yourself (First, Middle Initial, Last)	Age	Relationship to Parent/Guardian Applicant	Check if NO income
<i>(Example) Jane Smith</i>	37	<i>Parent Applicant (self)</i>	<input type="checkbox"/>
1.			<input type="checkbox"/>
2.			<input type="checkbox"/>
3.			<input type="checkbox"/>
4.			<input type="checkbox"/>
5.			<input type="checkbox"/>
6.			<input type="checkbox"/>
7.			<input type="checkbox"/>
8.			<input type="checkbox"/>
9.			<input type="checkbox"/>

PART 2. TOTAL HOUSEHOLD INCOME							
NAME (List only household members with income)		ANNUAL INCOME					Income Total Income (add columns a - d)
		a. Annual gross earnings from work	b. Welfare, child support, alimony	c. Pensions, retirement, Social Security, SSI, VA benefits	d. All Other		
<i>(Example) Mary Smith</i>		\$15,000	\$4,000	\$0	\$200	\$19,200	
1.						\$0.00	
2.						\$0.00	
3.						\$0.00	
4.						\$0.00	
5.						\$0.00	
6.						\$0.00	
7.						\$0.00	
Total Household Income Add total income (rows 1-7)						\$0.00	

Income must include:

- Gross wages, salaries, tips, commissions (“gross” means wages before taxes or other deductions)
- Net income from self-owned business or farm
- Alimony or child support received

- Pensions, retirement income, veterans' benefits, housing stipends
- Social Security/SSI
- Disability benefits
- Unemployment compensation and worker's compensation
- Net rental income, annuities, and net royalties
- Interest and dividend income
- Cash withdrawn from savings, trusts (unless the trust came through a distribution from the estate of a decedent) and/or investments
- Regular contributions from persons not living in the household
- Any other money that may be available (taxed and untaxed) line regular online sales

Did anyone in the household get income from self-employment last month? Yes No

If yes, attach a copy of the most recent Federal Income Tax Form 1040 for each self-employed person along with your application.

Checking/Savings and Other Accounts List types of resources and the amount or value, IRA, and Keogh Plans

Owner	Type	How Much?	Owner	Type	How Much?
	Checking: Single and/or Joint Accounts	\$		Saving: Single and/or Joint Accounts	\$
	CDs, Annuities, and/or Money Markets	\$		Stocks/Bonds and Mutual Fund Shares and Savings Certificates	\$
	Cash on Hand	\$		Revocable Trust Funds	\$
	Remaining Balance of Lump Sum Payments	\$		Equity in Real Property not used as a home or income producing	\$
	Net proceeds from a business, including a farm, which has been discounted	\$		Funds in a retirement account that are accessible: 401K, NC State Retirement	\$

Monthly Expenses

Rent/Mortgage (include tax & insurance)	\$ _____	Tithe/Offering	\$ _____	Cell Phone	\$ _____
Utilities (electric, gas, water, garbage)	\$ _____	Savings	\$ _____	Internet	\$ _____
Car Payments	\$ _____	Car Insurance	\$ _____	Groceries	\$ _____
Entertainment (movies, books, memberships)	\$ _____	Household Cleaning	\$ _____	Eating Out	\$ _____
Other - explain:	\$ _____	Clothes	\$ _____	Gas for car	\$ _____
					<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

In your own words please explain your desire/goal(s) to attend and participate in TRAX: RLA RIU CTC (circle applicable programs)

Explain the reason why you are asking for financial assistance?

What I need help with:

I need:

I can pay:

	I need:	I can pay:
RLA Admission Fee	<input type="checkbox"/>	<input type="checkbox"/>
RLA Curriculum Fee	<input type="checkbox"/>	<input type="checkbox"/>
RIU Registration Fee	<input type="checkbox"/>	<input type="checkbox"/>
Partial Tuition Fee	<input type="checkbox"/>	<input type="checkbox"/>
Full Tuition Fee	<input type="checkbox"/>	<input type="checkbox"/>