Financial Assistance Application

Spring 2018

Thank you for your interest in attending The Triangle Nonprofit & Volunteer Leadership Center’s (TNVLC). To apply for financial assistance, please bring all the following information to the TNVLC office.

1. Submit the completed Financial Assistance Application.
2. A copy of your current or previous year’s federal income tax return. If you do not file income taxes, please call 1-800-TAX FORM (1-800-829-1040) for a verification of non-filing or go to IRS.gov for other information.
3. Two most recent paycheck stubs or letters from your employer verifying your employment and stating your annual salary. If you are unemployed, receive social security or a full-time student, please provide a summary of your unemployment benefits, SSI paperwork, or financial aid benefits and student schedule.

Please mark out all social security numbers, tax ID numbers and/or credit card numbers before submitting any paperwork.

Applications must be submitted with all required documentation. Incomplete applications cannot be processed. All financial assistance is distributed on a case-by-case, first come-first-served basis. Please do not register for a program before you submit your financial assistance.

You will receive a determination email from us within 30 days following application submission.

Thank you,
The TNVLC Administration
TNVLC Financial Assistance Application

TNVLC strives to make our programs available to all who will benefit from them, regardless of their ability to pay. All financial assistance is granted on a sliding scale based on income and need. All information is kept confidential. *(Please Type or Print)*

**Student Information:**

Name:  

Phone Number: 

Email Address: 

Mailing Address:  

Birth Date:  

**Parent/Guardian Information:**

Name:  

Phone Number:  

Email Address:  

Occupation:  

Employer:  

Length of Employment:  
**Spouse and Dependents Living at Home**

Tax Forms must reflect those that are listed below.

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<th>Gender</th>
<th>Relationship (to Parent/Guardian)</th>
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**Please share why you are applying for financial assistance:**

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**Please itemize your gross annual household income.**

Salary, wages, tips:

________________________________________________________________________

Unemployment compensation:

________________________________________________________________________

Social Security compensation:

________________________________________________________________________

Child support:

________________________________________________________________________

Aid for Dependent Children:

________________________________________________________________________

Food stamps:

________________________________________________________________________

401(k) Retirement:

________________________________________________________________________

Alimony:

________________________________________________________________________

School loan income:

________________________________________________________________________

Housing allowance:

________________________________________________________________________

Other:

________________________________________________________________________

**Total Annual Income:**

________________________________________________________________________
Submit your completed Financial Assistance Application with the following:

1. Current or previous year’s Federal Tax Return (Form 1040 pages 1 and 2 only or 1040EZ)
2. Copies of your last two paycheck stubs OR a letter from your employer stating your annual salary
3. Copies of any supporting documentation listed in the above annual salary line items (optional)

* I do not file a Federal Tax Return based on federal government income guidelines.

I certify that this information is true and complete to the best of my knowledge. I grant permission to the Triangle Nonprofit & Volunteer Leadership Center to verify this information. I agree to notify the TNVLC if my financial status should change.

Signature of Parent/Guardian
Date

Signature of Student
Date

Return this form by **May 25, 2018** via mail or email:
The Triangle Nonprofit & Volunteer Leadership Center
Attn: Youth Service Awards, PO Box 3374, Durham, NC 27702
Email: youth@thevolunteercenter.org