MUST BE A NEVADA COUNTY RESIDENT

Academic Ghidotti: Ag Ghidotti:

Father's, Stepfather's or Guardian's Signature

(FINANCIAL FORM FOR GHIDOTTI SCHOLARSHIP APPLICANTS ONLY)

The Ghidotti Foundation is most reluctant to request detailed financial information from our scholarship applicants and their families; however, the terms of the trust under which we operate mandate that financial need for scholarships be established. The information we are seeking is modeled after the financial disclosure most major universities require of their scholarship applicants.

It is required that the student applicant and his/her father and mother and his/her stepfather or stepmother with whom the applicant resides, fill out the financial information below and <u>ATTACH A COPY OF THE FIRST TWO PAGES</u>

OF THE LAST FILED FORM 1040 (U.S. INDIVIDUAL INCOME TAX RETURN)**FROM EACH PARENT AND, IN ADDITION, FROM EACH STEPPARENT WITH WHOM THE APPLICANT RESIDES.

The rising cost of education has broadened our interpretation of need, so that scholarships are available to both low and middle income families.

All fi	nancial information is received, review	wed and dispose	d of in the stri	ictest of conf	idence.
STUI	DENT'S NAME:				
<u>PLEA</u>	SE PROVIDE THE FOLLOWING	INFORMATION	AS ACCURA	ATELY AND	COMPLETELY AS POSSIBLE:
ASSE	TS OF STUDENT'S FAMILY: (Fathe	er, Mother, Stepf	ather, Stepmo	ther)	
INCO	OME CATEGORIES:	Present Va	alue	Amount O	Owed
1. <u>C</u>	Cash, Savings, Checking Accounts				
2. <u>P</u>	ersonal Residence				
	Other Real Estate (Rentals, Land, etc.)_				
	tocks, Bonds, Other Securities				
	Susiness or Farm				
	All Other Assets (Investments, Notes Re				
7. <u>U</u>	Intaxed Income & Benefits (AFDC, Soc	. Sec., etc.)			
ASSE	TS OF STUDENT APPLICANT:		Last Year	This Y	ear ear
	Cash, Savings, Checking Accounts		<u> </u>		
	Net Income of Student				
ADDI	ITIONAL INFORMATION:		Amount	Natu	re of Obligation
	Monthly Home Mortgages or Rental Pa	ymonte		_ 10000	
	Payments on Extraordinary Obligations, (i.e. large medical bills, other children in college, etc.)				
2. <u>1</u>	ayments on Extraortinary Congations	s, (i.e. large mear	car bills, other	ciliui cii iii c	onege, etc.)
FOLL OBTA	YOU CANNOT OBTAIN A TAX RET OWING INFORMATION IS REQUIRE IN THIS INFORMATION AND A SIGNA JIREMENT IS NECESSARY IN ORDER F	D FROM THAT TURE, IT IS RE(PARENT, INC QUIRED THAT	CLUDING TH YOU EXPLAI	EIR SIGNATURE. IF YOU CANNO' IN FULLY. COMPLIANCE WITH THI
INCO	OME CATEGORIES:	Present Va	lue	Amount (Owed
1. <u>I</u>	ncome from any source				
2. (Cash, Savings, Checking Accounts				
3. <u>I</u>	Personal Residence				
4. <u>(</u>	Other Real Estate (Rentals, Land, etc.)				
5. <u>S</u>	Stocks, Bonds, Other Securities				
_	Business or Farm				
	All Other Assets (Investments, Notes Rec., etc.)				
8. <u>t</u>	Untaxed Income & Benefits (AFDC, Soc. Sec., etc.)				
3 7			v		

Mother's, Stepmother's or Guardian's Signature