

7. Briefly explain your need for financial assistance (include any extenuating circumstances that may significantly affect your family's financial situation).

8. Complete this section if you work at a job outside the home.

How many hours a week do you work at your job?
 1-5 _____ 6-10 _____ 11-15 _____ 15-20 _____ More than 20 _____

How many months have you worked/been employed during the last 12 months?
 1-3 _____ 4-6 _____ 7-9 _____ 10-12 _____

What is your job title? _____

Describe your job responsibilities _____

9. Complete this section if you DO NOT work outside the home.

I do volunteer work in my community Yes _____ No _____

I work for my family's business or farm Yes _____ No _____

I am actively involved in my church or school Yes _____ No _____

My parents do not permit me to work during school Yes _____ No _____

I have personally prepared this application and believe it to be correct.

 Applicant's signature

 Date

FOR OFFICE USE ONLY
(Do NOT write in the following space)

LEAP points for the current year	Total LEAP points
One semester tuition & fees	One semester housing cost
Number of years as a member	

<u>Application checklist</u>	<u>Meets requirements</u>
_____ Student form	NYCHA or NCHA member _____
_____ Counselor's form	Upper 50% of H.S. class _____
_____ Reference form	ACT - 20 or SAT - 950 _____
_____ LEAP form on file (if applicable)	Income less than \$100,000 _____
_____ High school transcript	College GPA - 3.0 (if applicable) _____
_____ College transcript (if applicable)	
_____ IRS return	
_____ Copy of college expenses from handbook or web page	