

TEACHERS:

1. For privacy reasons do not fax or mail this sheet. It will not be accepted
2. Instead, login into your school account, click on "Financial Aid"
3. Using this data sheet, complete the online application
4. We recommend that you destroy this sheet after completing the online application
5. Completing the online application should take less than 2 minutes.



Congressional Fellowship Data Sheet 2009-10

Instructions for Students and Parents

1. Complete this form with your parent or guardian
2. Return this form/documents to your Close Up teacher
3. All fields required
4. Make sure your teacher submits this online

Eligibility Requirements

- Meet income guidelines (waived for wards of the court or if student is in foster care)
- Never have received Close Up Financial Aid
- Enrollment Deposit must be paid

Student's First Name _____

Student's Last Name _____

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Participant I.D.

1. Are you a ward of a court or in foster care?
Yes No
2. Are you a foreign exchange student?
Yes No
3. Have you ever received Close Up financial aid funds?
Yes No

Income Requirements

Number of dependents (line 6d of IRS Form 1040 or 1040A)	1	2	3	4	5	6	7	8	More than 8
Contiguous US and DC Then family income may NOT exceed:	\$20,036	\$26,955	\$33,874	\$40,793	\$47,712	\$54,631	\$61,550	\$68,469	Add \$6,919 for each additional family member
Alaska Then family income may NOT exceed:	\$25,031	\$33,689	\$42,347	\$51,005	\$59,663	\$68,321	\$76,979	\$85,637	Add \$8,658 for each additional family member
Hawaii Then family income may NOT exceed:	\$23,051	\$31,006	\$38,961	\$46,916	\$54,871	\$62,826	\$70,781	\$78,736	Add \$7,955 for each additional family member

4. Number of dependents. Line 6d of IRS Form 1040 or 1040A.

5. Gross income of your family (before taxes). Line 22 of IRS Form 1040, line 15 of Form 1040A, or line 4 of Form 1040EZ. If a tax return was not filed, list the total amount of all support received during 2008. The Close Up teacher must verify family income by examining a copy of the federal tax return or other documentation.

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The Department of Ed requires us to provide the following data on award recipients. This data is not used in making awards.

6. Birthdate

/ /

7. Grade

9 10 11 12

8. Your Gender

Female Male

9. Are you a member of a farm/migrant community?

Yes No

10. Are you Spanish/Hispanic/Latino:

- No, not Spanish/Hispanic/Latino
- Yes, Mexican, Mexican American, or Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, Other Spanish/Hispanic/Latino

11. Which best describes you: (Check all that apply)

- White
- Black, African American
- American Indian or Alaska Native
- Native Hawaiian or other Pacific Islander
- Asian

12. Which best describes your school district.

- Urban (city)
- Suburban (outside city)
- Rural (country)

13. Are you: (Check all that apply)

- Hearing impaired
- Visually impaired
- Physically disabled

We certify that the information is correct to the best of our knowledge.

Student Participant _____

Date _____

Parent or Guardian _____

Date _____