



Columbus Citizens Foundation, Inc. 2009 High School Scholarship Program

INTRODUCTION

Introduction

The Columbus Citizens Foundation is a non-profit organization in New York City committed to fostering an appreciation of Italian-American ancestry and achievement. The Foundation, through a broad range of philanthropic and cultural activities, provides opportunities for advancement to deserving Italian-American students through various scholarship and grant programs. Since its founding in 1929, the Foundation has organized New York City's Columbus Day Parade.

It is the Foundation's hope that future generations of Italian-Americans will honor those who came before them by upholding the values of love of country, family and a tireless work ethic. It is in this spirit that the Columbus Citizens Foundation offers **four-year High School Scholarships** to entering freshmen. Scholarships, while generous, are partial assistance and will not cover payment for all school costs.

Scholarship Criteria

To be considered for this scholarship you must meet the following criteria:

- **Existence of Italian-American Ancestry**
- **Financial Need (income not to exceed \$20,000 per household dependent)****
- **Academic Excellence (at least 85% or 3.25 Grade Point Average)**
- **Service to School and Community**

**The per household dependent calculation is based upon the income of the applicant's parent(s)/guardian(s), which includes gross W-2 salary, child support, social security, net income from self-employment and all investment income. The total of that income is then divided by the amount of dependent family members. Therefore, a family of 5 whose total income is \$100,000 will qualify under the financial need criteria.

Columbus Citizens Foundation General High School Scholarship Program

The Foundation will consider all private high schools in the United States as qualifying institutions.

High School Scholarship Continuance Requirements

Please see Part D: Notary Section for more information.

Columbus Citizens Foundation's Adopt-A-Scholar Program

In addition to the Foundation's general high school scholarship program, we have a unique program in its eighth year called the Adopt-A-Scholar program. The Program allows a particular donor to fund a scholarship in the name of a friend, family member or loved one and to choose a recipient attending a particular school, from a geographical area, or specializing in a specific field of study. We currently have scholarships available for students entering the following schools:

Don Bosco Preparatory High School
Fordham Preparatory School
New York Military Academy

Saint Joseph Hill Academy
St. Francis Xavier High School
St. Mary's High School

The Loyola School
The Montfort Academy
The Ursuline School
Xaverian High School

Important: The above list represents only those scholarships available through the Adopt-A-Scholar Program. Scholarships are available to other schools through our General High School Scholarship Program. This application is for both the General Scholarship Program and the Adopt-A-Scholar Program.

INSTRUCTIONS TO APPLICANT

Mandatory Interview in New York City

Each semi-finalist will be required to appear in person for an interview at the Foundation in New York City at his or her expense. Any costs associated with travel, meals and accommodations for the semi-finalists and anyone accompanying them to the interview in New York City will NOT be reimbursed by the Foundation under any circumstances. An invitation to an interview does not signify that you will receive a scholarship. Do not complete this application if you will be unable to attend this in-person interview.

Parents must complete Part A - Parent Financial Information.

Students must complete Part B - Student Information.

The student's principal or guidance counselor must complete Part C - School Information.

Part D - Notarized Signature, must be witnessed and embossed by a Notary Public.

Please read the following instructions very carefully. In addition to the above criteria, applicants will be judged based upon their ability to follow directions. Application packages must be completed including all supporting documentation requested throughout the application. Please be advised that incomplete application packages and late submissions will be disqualified automatically.

1) Deadline: Applications must be received **no later than Monday, February 2, 2009**. Application packages should be mailed via certified or registered mail to ensure receipt to:

Private School Aid Service
CCF High School Scholarship 2009
P.O. Box 770728
Lakewood, OH 44107-0034

Private School Aid Service is the company that will be evaluating financial eligibility for the scholarship.

2) Call Rule: Please call PSAS at (440) 892-4272 to check the status of your application review process or visit www.psas.org. PSAS will also contact you by mail if your application is incomplete - **please be aware that you may receive envelopes from PSAS in Ohio.**

3) Put Your Best Foot Forward: Your application should be complete, presentable and legible. Please print clearly using blue or black ink (no pencil) or type your responses to all questions.

4) Tax Requirements: All applicants are required to provide a complete copy of their parent(s)/guardian(s)' 2007 State and Federal Income Tax Returns, an IRS 4506-T Form for 2007 (which can be found on page 6 of this application) as well as copies of all 2007 W-2 Forms. Candidates chosen as semi-finalists will be required to submit full copies of their parent(s)/guardian(s)' 2008 State and Federal Income Tax Returns, as well as an IRS 4506-T Form for 2008.

5) Letters of Recommendation: You must submit **three** letters of recommendation that specifically address why you should be selected as a scholarship recipient. Do not submit recommendations used for high school admission. One recommendation should be of an academic nature (i.e. Teacher, Principal, Guidance Counselor, etc.). The other two should be of a non-academic nature (i.e. Community, Church, Employer, Coach, Youth Group Coordinator, etc.). **Do not send more than three letters of recommendation.** It will not help your chances of receiving a scholarship and could disqualify your application.

6) Essay: An essay topic has been provided for you in Section Q. Type your essay (double spaced) on a separate sheet of paper and make sure your name is identified on the top and included in your application package.

7) Academic Performance Verification: In Part C - Section S we request verification of your academic performance. Your school Guidance Counselor or Principal must complete this Section. **The information must be provided back to you in a sealed envelope for you to include in your application package.** It is your responsibility to ensure you obtain this information and that it is not sent separate from your application.

8) Supporting Documentation: In various areas of the application we request supporting documentation. Please ensure you include this information with your application.

9) Application Fee: Check or Money Order payable to PRIVATE SCHOOL AID SERVICE for the non-refundable application fee of \$25.00 (**All returned checks will incur an additional fee of \$25.00**).

10) Copy For Your Files: The original application and supporting documentation (Form W-2's, essays, recommendation letters, etc.) will become property of the Foundation and **will not be returned to you.** You must retain the originals of those documents you need for your personal files (i.e. Form W-2's) and provide us with copies. Please note all information will be treated in a private and confidential manner.

PART A
Parent Financial Information



Columbus Citizens Foundation
High School Scholarship Program



Applications processed by
Private School Aid Service

A FATHER OR GUARDIAN RESPONSIBLE FOR TUITION

B MOTHER, GUARDIAN or OTHER ADULT RESIDING WITH PARENT A

Last Name _____ First Name _____ MI _____
 Social Security Number _____ Age _____ (_____) _____
 (Area Code) Home or Cell Phone _____
 Address _____ Apt. # _____
 City _____ State _____ Zip _____
 Occupation/Title/Rank _____ (_____) _____
 (Area Code) Work Phone _____
 If you are self-employed, check this box
 and complete Section K of this form. _____
 E-mail address _____
 Employed by _____ Dates of Employment _____ May PSAS contact you at work if
 there are questions? Yes No

Last Name _____ First Name _____ MI _____
 Social Security Number _____ Age _____ (_____) _____
 (Area Code) Home or Cell Phone _____
 Occupation/Title/Rank _____ (_____) _____
 (Area Code) Work Phone _____
 If you are self-employed, check this box
 and complete Section K of this form. _____
 E-mail address _____
 Employed by _____ Dates of Employment _____ May PSAS contact you at work if
 there are questions? Yes No
 If Parent A is unemployed, state reason _____
 If Parent B is unemployed, state reason _____
 Mother's Maiden Name _____

C DEPENDENTS (DO NOT LEAVE BLANK)

Number of dependent children who will attend a tuition charging school: daycare, Pre-K, elementary school, secondary school, or college in the fall of 2009. _____

Please list all dependent children in order of oldest to youngest, including college students.

	Dependent Last Name	Dependent First Name	MI	Age	Name of school student plans to enter in the fall of 2009 - OR - Occupation (If not attending school).	Grade in the fall of 2009	Received Columbus Citizens Foundation grant/scholarship in the past	Year received	Office Use Only
					City/State				
1					School Name: City/State:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
2					School Name: City/State:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
3					School Name: City/State:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
4					School Name: City/State:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
5					School Name: City/State:		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please check if additional dependents are listed on a separate sheet.

D HOUSEHOLD INFORMATION

1. Number of individuals who will reside in my/our household during the 2009-2010 school year:

Parents/Guardians _____ Children _____ Other* _____

*If Other, please explain relationship to Parent _____

Applicant lives with father and mother: Yes No. If no, please explain in Section L.

2. Current marital status/housing arrangement of Parent/Guardian A:

- a. Single, never Married* d. Divorced* g. Residing w/Significant Other
- b. Married e. Remarried* h. Other: _____
- c. Widowed f. Separated* _____

*If Divorced, Remarried, Separated or Single, please complete Section E.

E DIVORCED, SEPARATED OR SINGLE PARENTS (TO BE COMPLETED BY PARENT OR GUARDIAN LISTED IN SECTION A)

1. Date of separation (Month/Year) _____
 2. Date of divorce (Month/Year) _____
 3. Non-custodial parent _____
 Last Name _____ First Name _____ MI _____
 4. Do you receive or pay child support? Receive \$ _____ per year
 Pay \$ _____ per year
 Neither

5. Who claimed student as a tax dependent in 2007? _____
 6. Who is responsible for the tuition for the dependent(s) listed in Section C?
 Father _____ % Name _____
 Mother _____ % Name _____
 Other _____ % Name _____ *

*If tuition is shared, each responsible party must complete an Student Aid Form (SAF).

F TAXABLE INCOME

The **2007** federal tax return for student's household was:

- Filed
- Not filed yet (See **Required Documentation** section)
- I/we do not file. I/we only receive non-taxable income

	Actual 2007	Estimate 2008
1. Total number of exemptions claimed on Federal Income Tax form:	[]	[]
2. Parent/Guardian A total taxable income from W-2 wages. (List total income for Parent A only)	\$ _____	\$ _____
3. Parent/Guardian B total taxable income from W-2 wages. (List total income for Parent B only)	\$ _____	\$ _____
4. Net business income* from self-employment, farm, rentals, and other businesses. (*Go to Section K) (Attach Schedule C, E, and/or F from your IRS 1040) See 2007 1040 lines 12, 17 and 18	\$ _____	\$ _____
5. Other non-work taxable income from interest, dividends, alimony, unemployment, and non-business income. See 2007 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21 See 2007 1040A lines 8a-14b	\$ _____	\$ _____
6. Allowable "Adjustments to Income" as reported on your IRS 1040, 1040A or 1040EZ. See 2007 1040 line 36 or 1040A line 20	\$ _____	\$ _____
7. Total "Adjusted Gross Income" as reported on your IRS 1040, 1040A or 1040EZ. See 2007 1040 line 37 or 1040A line 21	\$ _____	\$ _____
8. Total Tax Paid as reported on your IRS 1040, 1040A or 1040EZ. See 2007 1040 line 63 or 1040A line 37	\$ _____	\$ _____
9. Medical/dental expenses as reported on Schedule A line 1 of your IRS 1040 Form.	\$ _____	\$ _____

G NON-TAXABLE INCOME

List the **total amount** received from 1/1/07-12/31/07 for **all** recipients in household.

DO NOT list monthly amounts.

10. Child support	\$ _____ per year
11. Cash Assistance (TANF)	\$ _____ per year*
12. Food Stamps	\$ _____ per year*
13. Social Security income (SSI/SSD, etc.) (Provide documentation for all recipients in household.)	\$ _____ per year*
14. Student loans and/or grants received for PARENT's education. (Not college attending dependents or students listed in Section C.)	
a. total received in 2007 \$ _____*	
b. total used for household expenses	\$ _____ per year*
15. Housing assistance (Sec. 8, HUD, Parsonage, etc.)	\$ _____ per year*
16. Other non-taxable income (Workers' Comp., Retirement, etc. Identify source(s) in Section L)	\$ _____ per year*
17. Loans/Gifts from friends or relatives	\$ _____ per year
18. Personal Savings/Investment Accounts used for household expenses (Do not include totals listed in Section I)	\$ _____ per year
19. Pension	\$ _____ per year*
20. Long-term Disability	\$ _____ per year*
21. Survivor Benefits	\$ _____ per year*
22. Medicaid	\$ _____ per year
23. Aid for Dependent Children (ADC)	\$ _____ per year
24. Total non-taxable income for 2007	\$ _____ per year

*You must provide **2007 YEAR-END** documentation for items 11-16; either a Year-End Statement from the appropriate Public Agency, or documentation showing totals from 1/1/07 - 12/31/07.

H HOUSING INFORMATION (DO NOT LEAVE BLANK)

25. Do you rent or own your residence? Rent Own (go to line 27)
- a. How long have you been living in your current home? _____
26. If renting, what is the monthly rental payment? \$ _____
- a. Amount paid by household \$ _____ per month
- b. Amount paid by other source(s) \$ _____ per month
27. If you own your residence:
- a. What is the current market value? \$ _____
- b. What is the amount still owed, including home equity loans? \$ _____
- c. What is the monthly mortgage payment? \$ _____ per month
- d. How long have you been living in your current home? _____

I ASSETS & INVESTMENTS (AS OF 12/31/07)

28. Total amount in cash, checking, and savings accounts \$ _____
29. Total value of money market funds, mutual funds, stocks, bonds, CDs, or other securities \$ _____
30. Total value of IRA, Keogh, 401K, SEP or other retirement accounts \$ _____
31. If you own real estate other than your primary residence,
- a. What is the fair market value? \$ _____
- b. What is the amount still owed? \$ _____
32. Do you own a business? Yes No
- If **Yes**, please go to **Section K**.
- a. What is the fair market value of your business? \$ _____
- b. What is the amount still owed? \$ _____
33. Do you own a farm? Yes No
- If **Yes**, please go to **Section K**.
- a. What is the fair market value of your farm? \$ _____
- b. What is the amount still owed? \$ _____

J UNUSUAL CIRCUMSTANCES

Check all that apply to your situation within the past 12 months

(explain in Section L on following page):

- | | |
|--|---|
| a. <input type="checkbox"/> Loss of job | i. <input type="checkbox"/> Death in the family |
| b. <input type="checkbox"/> Recent separation/divorce | j. <input type="checkbox"/> Shared custody |
| c. <input type="checkbox"/> Change in family living status | k. <input type="checkbox"/> High debt |
| d. <input type="checkbox"/> Change in work status | l. <input type="checkbox"/> Child support reduction |
| e. <input type="checkbox"/> Bankruptcy | m. <input type="checkbox"/> Medical/Dental expenses |
| f. <input type="checkbox"/> College expenses | n. <input type="checkbox"/> Shared tuition |
| g. <input type="checkbox"/> Income reduction | o. <input type="checkbox"/> Other |
| h. <input type="checkbox"/> Illness or injury | |

Go to next page ⇒

Request for Transcript of Tax Return

(Rev. January 2008)

Department of the Treasury
Internal Revenue Service

- ▶ **Do not sign this form unless all applicable lines have been completed. Read the instructions on page 2.**
- ▶ **Request may be rejected if the form is incomplete, illegible, or any required line was blank at the time of signature.**

OMB No. 1545-1872

Tip: Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use **Form 4506**, Request for Copy of Tax Return. There is a fee to get a copy of your return.

1a Name shown on tax return. If a joint return, enter the name shown first.	1b First social security number on tax return or employer identification number (see instructions)
2a If a joint return, enter spouse's name shown on tax return	2b Second social security number if joint tax return

3 Current name, address (including apt., room, or suite no.), city, state, and ZIP code

4 Previous address shown on the last return filed if different from line 3

5 If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

Private School Aid Service / 909 Canterbury Rd. Suite P / Westlake, OH 44145 / ph (440) 892-4272 fax (775) 993-1730

Caution: DO NOT SIGN this form if a third party requires you to complete Form 4506-T, and lines 6 and 9 are blank.

6 Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶ 1040

a Return Transcript, which includes most of the line items of a tax return as filed with the IRS. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days

b Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days

c Record of Account, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days

7 Verification of Nonfiling, which is proof from the IRS that you **did not** file a return for the year. Most requests will be processed within 10 business days

8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2006, filed in 2007, will not be available from the IRS until 2008. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days

Caution: If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

9 Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

12 / 31 / 2007 / / / /

Signature of taxpayer(s). I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, **either** husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer.

Sign Here	Signature (see instructions)	03/31/2009	Telephone number of taxpayer on line 1a or 2a ()
		Date	
	Title (if line 1a above is a corporation, partnership, estate, or trust)		
	Spouse's signature	03/31/2009	
		Date	



PART B Student Information

**High School Scholarship Program
2009 High School Scholarship Application**

This application should NOT be completed if you have not read the accompanying introduction and instructions. If you have received the application without the introduction and instructions, please obtain a full and current application at www.columbuscitizensfd.org. If you do not meet the scholarship criteria outlined in these documents, do not complete the application.

SECTION N - GENERAL INFORMATION

Name: _____

Social Security #: _____ Birth Date: _____

Home Address: _____ Apt#: _____

City: _____ County: _____ State: _____ Zip Code: _____

Home #: _____ Mobile #: _____

Email: _____

SECTION O - ITALIAN-AMERICAN HERITAGE

My Italian ancestry is derived through: Father Mother Guardian

Please complete the applicant ancestor family tree and provide a detailed explanation below:

APPLICANT ANCESTOR FAMILY TREE

Your family history is very important to us. Please complete the ancestor family tree in full below by filling in the boxes to include the Legal Names and Places of Birth of the Applicant, Parents and Grandparents.

Maternal

Paternal

Grandmother's Maiden Name
Place of Birth

Grandfather's Name
Place of Birth

Grandmother's Maiden Name
Place of Birth

Grandfather's Name
Place of Birth



Mother's Maiden Name
Place of Birth

Father's Name
Place of Birth



Applicant's Name
Place of Birth

SECTION Q - ESSAY

Please create an original essay (250 to 300 words) describing a memorable life experience you have had and what you learned from it. How does that experience relate to your Italian-American heritage? Your essay must be typed (double-spaced) on separate sheets of paper. Make sure your name is identified on top of each page of the essay.

SECTION R - HIGH SCHOOL TUITION / SCHOLARSHIP INFORMATION

List High Schools applied to *in order of preference*. Please provide supporting documentation to substantiate tuition costs:

High School	Annual Tuition	Application Status (i.e. pending, accepted, not accepted)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

List all tuition assistance, scholarships, awards and grants you have received toward your high school education. Please attach the official documentation/notification you have received from the school, foundation or institution notifying you of your award.

Description/Institution Granting Award	\$ Amount per year
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

PART C SCHOOL INFORMATION

SECTION S - ACADEMIC PERFORMANCE VERIFICATION

(To be completed by Principal/Guidance Counselor)

This part of the application is to be completed by the school Principal or Guidance Counselor accompanied by a **full seventh grade and current eighth grade report card**. Please complete all questions, even if the information is contained in the report cards. Please return to the student in a sealed envelope so that it can be returned to the Columbus Citizens Foundation as part of the student's application package.

Student's Name: _____

Elementary School: _____

School Address: _____

Seventh Grade Average: _____ Cooperative Entrance Exam Score: _____

TACHS Exam Composite Score: _____

Checklist:

1. Report Card attached? Yes No
2. TACHS Exam Scores provided? Yes No
3. I have attached a separate letter of recommendation? Yes No

Important: I certify that the information provided is accurate, and I have provided this information to the above-mentioned student in a sealed envelope for inclusion in the student's Scholarship application package.

Name (please print): _____

Title (Principal/Guidance Counselor) _____

Signature: _____

Date: _____

INTRODUCTION

PRIVATE SCHOOL AID SERVICE (PSAS) is under contract with the Columbus Citizens Foundation, Inc. Our purpose is to provide a reasonable assessment of the ability of each family to pay for the education of their children at private and independent elementary and secondary schools.

Your Student Aid Form, all attachments, and an analysis of your SAF are sent **only** to the Columbus Citizens Foundation, Inc. **No other agency will receive any information about this application or its attachments.**

PRIVATE SCHOOL AID SERVICE does not make any decisions about recipients and amounts of financial aid awarded. Recipients and amounts of aid are determined by the Columbus Citizens Foundation, Inc. **YOU WILL NOT RECEIVE RESULTS FROM PRIVATE SCHOOL AID SERVICE.**

INSTRUCTIONS

A & B PARENT, GUARDIAN OR OTHER ADULT

This form should be filled out by the parent, guardian or other adult responsible for the tuition of the child or children attending a private or independent school contracting with PSAS. If the parents/guardians are divorced or separated, only the parent responsible for the tuition and any other adult residing in the household should fill out the form. If tuition is shared, each responsible party must complete a Student Aid Form (SAF) if financial aid is needed.

Answer *all questions* for both parent(s), stepparent(s), or guardian(s) responsible for tuition for the dependent(s) listed in Section C. **Do not leave any questions blank.** If natural parents are divorced, separated or single, answer all questions in Section E. If natural parents are divorced/separated and remarried, list information for custodial parent and new spouse. If either parent answers "self-employed," and has not filed a tax return, complete Section K.

CALCULATIONS ARE BASED ON TOTAL HOUSEHOLD INCOME.

C STUDENT INFORMATION

List all dependent children residing in your household in order of oldest to youngest. If your dependents will be enrolled in any tuition charging school or agency next fall (including daycare, preschool, elementary school, high school, college, or trade school), list the name of the school, city and state where the school is located. List the grade your child(ren) will enter next fall (2009-2010); where the student received a grant from Columbus Citizens Foundation in the past and, if so, what year received.

D HOUSEHOLD INFORMATION

ITEM 1: Enter total number of individuals living in household. Include any college students claimed on the tax return. Do not include children who have moved out of the home. Include all family members dependent on and residing with parent listed in Section A.

ITEM 2: Check the appropriate box indicating custodial parents' marital status. If parents are divorced, separated or single, complete Section E.

E DIVORCED, SEPARATED OR SINGLE PARENTS

If dependent(s) parents are divorced or separated, or do not reside in the same household, the custodial parent must provide the information requested in Section E about the non-custodial parent.

If the date of separation took place in the year 2007, PSAS will require copies of any tax returns filed jointly or independently by both parent(s)/guardian(s) for 2007. Be sure to estimate the income in Section F for 2008.

ITEM 4: List the total amount of child support actually received by custodial parents listed in Sections A & B. *If total received differs from court ordered amount, list only the total received.*

ITEM 6: Indicate who is responsible for tuition and what percentage for the dependents listed in Section C.

F TAXABLE INCOME

List all actual amounts for 2007 and estimated amounts for 2008.

ITEM 1: Enter the total number of exemptions you claimed on your **2007** IRS Form 1040, 1040A, or 1040EZ.

ITEM 2: Enter the total **2007** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION A. Attach all copies of **2007** W-2 forms and/or **2007** 1099 forms from all employers.

ITEM 3: Enter the total **2007** taxable income earned in wages, salaries and tips for parent/guardian/other listed in SECTION B. Attach all copies of **2007** W-2 forms and/or **2007** 1099 forms from all employers.

ITEM 4: Enter the total net income from business (attach Schedule C or C-EZ), all rents, royalties, partnerships (attach Schedule E), and all farm income or loss (attach Schedule F). If you have received income from any of these sources and are estimating your income for 2007, you must also fill out Section K of this application. *(See 2007 1040 lines 12, 17 and 18, enter sum total.)*

ITEM 5: Enter the total of all other taxable income from interest, dividend income (attach Schedule B if over \$400), taxable refunds, credits or offsets of state and local income taxes, alimony received, capital gain or loss (attach Schedule D). List all capital gain distributions not previously reported, total IRA distributions (if rolled-over, explain in Section L), pensions and annuities, unemployment compensation, taxable social security benefits, and any other taxable income. **Attach copies of all Form 1099/1099R, and/or Form 1098 for Interest/Dividends, Pensions/Annuities or other misc. income. Attach copies of Social Security Income statements and Unemployment Compensation documentation for year-end 2007.** *(See 2007 1040 lines 8a, 9a-11, 13, 14, 15b, 16b, 19-21 or 1040A lines 8a-14b, enter sum total.)*

ITEM 6: Enter allowable adjustments to income, such as IRA payments, self-employment tax, self-employed health insurance deduction, Keogh retirement plan and self-employed SEP deductions, penalty on early savings withdrawals, and alimony paid. Add together to arrive at your total adjustments. **DO NOT** include your standard deduction or deduction amounts for each family member. *(See 2007 1040 line 36 or 1040A line 20.)*

ITEM 7: Enter total adjusted gross income as reported on your IRS Form 1040, 1040A or 1040EZ. Attach all pages of the applicable tax form (1040, 1040A, 1040EZ) for documentation. *(See 2007 1040 line 37 or 1040A line 21.)*

ITEM 8: Enter the Total Tax paid (not withheld) as reported on your IRS Form 1040, 1040A, or 1040EZ. *(See 2007 1040 line 63 or 1040A line 37.)*

ITEM 9: Enter the total of any medical and dental expenses reported on Schedule A line 1 of your IRS Form 1040 (attach Schedule A).

G NON-TAXABLE INCOME

If you receive non-taxable income, **you must list and provide documentation of the TOTAL YEARLY AMOUNTS received in 2007** for all recipients in the household for the following: Cash Assistance (TANF), Food Stamps, Social Security income, Student loans and/or grants (received for PARENT's education), Housing assistance (Section 8, HUD, etc.), Worker's Compensation, Disability or Retirement.

ITEM 10: Child support: Report total amount received for **2007** for all children in the household.

ITEM 11: Cash Assistance (TANF): Report total amount received for **2007**.

ITEM 12: Food Stamps: Report total amount received for **2007**. Do not combine with TANF.

ITEM 13: Social Security benefits: Report the total non-taxable amount received in **2007** for all recipients in household.

ITEM 14: Student loans and/or grants: Report the total amount received in **2007** for PARENT'S education. Do not list loans, grants or scholarships received for dependents in Section C. Identify how much of this income was used for household expenses in **2007**.

ITEM 15: Housing assistance: Report the total amount received for **2007**. Identify in Section L all sources of Housing assistance (parsonage, government assistance, Section 8, HUD, family/friends or other sources), including monies received toward rental/mortgage payments and/or utilities.

ITEM 16: Other non-taxable income: Report all additional non-taxable income received in **2007** including: Deductible IRA or Keogh payments; untaxed portions of pensions; tax exempt interest income; foreign income exclusion; Workers' Compensation; veterans non-education benefits (Death Pension, Dependency and Indemnity Compensation, etc.); food and other living allowances paid to members of the military, clergy or others; cash support or any money paid on your behalf, including support from a non-custodial parent or any other person (do not include court ordered support here); or any other untaxed benefit or income not subject to taxation by any government (Refugee Assistance, VA Educational Work-Study, etc.). Identify source(s) in Section L.

ITEM 17: Loans/Gifts received from friends or relatives: Report the total amount received in **2007**.

ITEM 18: Personal Savings/Investment Accounts: Report the total amount used in **2007** for household expenses.

ITEM 24: Total non-taxable income for 2007: Add together Items 10-23.

H HOUSING INFORMATION

ITEM 25 and 26: If you rent your home or apartment, list your monthly rental or lease payment here, including amounts paid by household and other sources.

ITEM 27a: Determine the present value of the family home and list it. Local real estate agents should be able to help you if you are unsure.

ITEM 27b: Check with your lending institution and enter the amount still owed, including second mortgages.

I ASSETS AND INVESTMENTS

ITEM 28: List total of current balances in cash, savings, and checking accounts. Do not include IRAs or Keoghs.

ITEM 29: List total current market value of money market funds, mutual funds, stocks, bonds, CDs or other securities.

ITEM 30: List total current market value of all retirement funds, including IRA, Keogh, 401K, and SEP plans or other retirement accounts.

ITEM 31: Answer Items 31a and 31b for any and all investment real estate (not including the family's primary residence), if applicable. Second homes, rental properties, and land contracts should be included.

ITEM 32: If you own a business, check the Yes box and answer Items 32a and 32b. If you have not filed your **2007** tax return, complete Section K of this application.

ITEM 33: If you own a farm, check the Yes box and answer Items 33a and 33b. If you have not filed your **2007** tax return, complete Section K of this application.

J UNUSUAL CIRCUMSTANCES

Check any and all items that apply to your situation. If your circumstances require explanation beyond the scope of this application, please notify the school to which you are applying. Do not include a letter of explanation with this application.

K BUSINESS INCOME

Provide 2007 Business Income Estimates if you have not filed your 2007 Tax Return.

ITEM 1: List estimated total GROSS taxable business income for **2007**.

ITEM 2: List estimated total NET taxable business income/loss for **2007**.

ITEM 3: List the total amount paid by business in **2007** for home rent or mortgage.

ITEM 4: List the total amount paid by business in **2007** for personal automobile.

ITEM 5: List the total amount of personal expenses paid by business in **2007** that do not fall into one of the categories above.

ITEM 6: List total amount of estimated rental income received in **2007**.

If providing income estimates for more than one business, corporation or farm (Schedule C, Schedule E and/or Schedule F) please list information for each business, corporation or farm separately. Use additional sheet or Section L, if necessary.

L EXPLANATION

If any specific question requires clarification, write a brief explanation in this space. If your circumstances require explanation beyond the scope of this application, please notify the school to which you are applying.

M PARENTS' CERTIFICATION, AUTHORIZATION, AND DOCUMENTATION CHECKLIST

You **must** sign the form in this section. Your signature authorizes PSAS to release the form and attachments to the contracting schools indicated in Section C. By signing the form, you also certify that the information submitted is correct. This application CANNOT be processed without the appropriate signature(s) and the appropriate documentation.

REQUIRED DOCUMENTATION

If you have filed your 2007 IRS Form 1040:

You must submit photocopies of all pages of your **2007** Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, **2007** W-2 Forms, **2007** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s)). *Do not include your State tax return unless requested.*

If you have not filed your 2007 IRS Form 1040:

You must submit photocopies of all **2007** W-2 Forms, **2007** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s), and photocopies of all pages of your most recent Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules). **You must provide a copy of the 2007 Extension for Filing Request, as approved by the IRS and a copy of your last filed tax return.**

If you are an Independent Contractor or self-employed and have not filed your 2007 IRS Form 1040:

You must complete Section K and submit photocopies of all pages of your most recent Federal Tax Return Form 1040, 1040A or 1040EZ (as filed with the IRS, with all Schedules, **2007** W-2 Forms, **2007** 1099/1099R, or 1098 Forms for any wage-earning adult residing with the applicant(s)). **You must provide a copy of the 2007 Extension for Filing Request, as approved by the IRS and a copy of your last filed tax return.**

If you receive non-taxable income:

You must submit photocopies of your **2007** YEAR-END (01/01/07 - 12/31/07) Cash Assistance documentation (TANF, etc.), Food Stamp documentation, Housing Assistance documentation, Student loan and/or grant documentation (for PARENT's education), Social Security Income statements, showing the **TOTAL AMOUNT** received in **2007** for **ALL** members of the household. If you list any total for line 16, you must identify source(s) in Section L.

ARE YOU ELIGIBLE TO SUBMIT YOUR APPLICATION?

1) Will you be entering high school as a freshman in August/September 2009?

Yes. Continue



No



You do not meet the criteria to submit an application.

2) Are you of Italian-American ancestry and have you completed Section O including the ancestor family tree?

Yes. Continue



No



You do not meet the criteria to submit an application.

3) Is your per-household dependent income \$20,000 or less?

(Meeting the requirement DOES NOT ensure the receipt of a scholarship.)

Yes. Continue



No



You do not meet the criteria to submit an application unless you have extraordinary circumstances. If so, provide explanation on a separate sheet of paper.

4) Have you submitted all supporting documentation requested in Section M?

Yes. Continue



No



You do not meet the criteria to submit an application.

5) Do you have excellent service to your school and community and have you completed Section P?

Yes. Continue



No



You do not meet the criteria to submit an application.

6) Have you completed the required essay requested in Section Q?

Yes. Continue



No



You do not meet the criteria to submit an application.

7) Indicate your seventh grade point average here _____ . Is it at least 85% or 3.25?

Yes. Continue



No



You do not meet the criteria to submit an application.

8) Have you provided the complete data requested in Section R regarding high school choice, tuition costs and the status of your application?

Yes. Continue



No



You do not meet the criteria to submit an application.

9) Have you provided details of all tuition assistance you will receive from all sources required in Section R?
(i.e. - financial assistance awards, scholarships, grants, etc.)

Yes. Continue



No



You do not meet the criteria to submit an application.

10) Have you obtained and included in a sealed envelope the academic verification information requested in Section S?
(To be obtained from Guidance Counselor)

Yes. Continue



No



You do not meet the criteria to submit an application.

11) Have you submitted three letters of recommendation?

Yes. Continue



No



You do not meet the criteria to submit an application.

12) If chosen as a semi-finalist, will you be able to attend an interview in New York City at your own expense?

Yes. Continue



No



You do not meet the criteria to submit an application.

13) Will the Columbus Citizens Foundation receive your application no later than **February 2, 2009**?

Yes. Continue



No



You do not meet the criteria to submit an application.

PART D NOTARY SECTION

IMPORTANT NOTICE OF DISCLOSURE

The following statement must be read, agreed to and signed by a parent/guardian. In addition, the signature must be witnessed by a Notary Public.

Application and Selection:

I certify that all of the information contained in this application is complete and true to the best of my knowledge and belief. I understand that any misrepresentation and/or falsification of information intended to help advance the applicant will result in the rejection of the application. I further understand that the receipt and acceptance of any scholarship monies awarded by the Columbus Citizens Foundation, on the basis of any misrepresentation or falsehood submitted in this application, will subject the undersigned to the penalties for perjury and to possible civil liability for restitution of all monies paid by the Foundation on behalf of the student applicant, with interest.

Grant Eligibility/Continuance:

In accordance with your selection and acceptance of a Columbus Citizens Foundation Scholarship, recipients are required to maintain their eligibility for this grant in each of their school years as follows:

1. All Columbus Citizens Foundation Scholarship recipients are required, as a condition of their acceptance of this "Scholarship Grant" to enroll and complete in each school year an Italian language course(s), as well as any AP Italian language course(s), offered by the high school attended by the recipient.
2. Each recipient is required to maintain an overall "Grade Point Average" of not less than 85% in each school year.
3. The undersigned parent/guardian recognizes and understands that the recipient's failure to comply with these requirements in each school year will result in the withdrawal of this grant and termination of their Columbus Citizens Foundation Scholarship.

Parent/Guardian Name (Please print): _____

Parent/Guardian Signature: _____

SWORN TO BEFORE ME

THIS _____ DAY _____ OF 200_____

NOTARY PUBLIC