



**PART III EDUCATION (continued)**

Note any educational achievements:

Community interests: activities in which you participated, held office, etc

**PART IV. STUDY PLANS**

What is your proposed field of study? \_\_\_\_\_

What specific skills do you plan to study? \_\_\_\_\_

Where do you plan to study (school and location)? \_\_\_\_\_

Are you presently enrolled      Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been accepted for enrollment in the above institution?      Yes \_\_\_      No \_\_\_\_\_

Approximate period of study:      From \_\_\_\_\_ to \_\_\_\_\_

**PART V. PLANS AFTER COMPLETING STUDY**

How do you expect to use your updated skills in your planned career?

**PART VI. FINANCES**

**Annual Family Income**

1. Gross Annual income of:	Source	Amount
*Applicant	_____	_____
*Spouse	_____	_____
*Other Household Members	_____	_____
TOTAL GROSS INCOME	_____	_____
2. Savings available for school	_____	_____
3. Loans/Scholarships	_____	_____
4. Other (benefits, family assistance, etc.)	_____	_____

**PART VI. FINANCES (CONTINUED)**

5. Applicant's education expenses: Tuition \_\_\_\_\_ Books \_\_\_\_\_  
Transportation \_\_\_\_\_ Other (describe) \_\_\_\_\_

6. Family living expenses (child care, child education, medical, etc.) List and describe: \_\_\_\_\_  
\_\_\_\_\_

**PART VII. HOW MUCH IS THIS GRANT REQUEST FOR** \_\_\_\_\_

**PART VIII. REFERENCES**

I have requested that personal references on myself by sent to the designated Arise Charitable Trust by the following two people who represent two different sources and are not related to me:

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**PART IX. AGREEMENT**

I understand that if given any award, all applications and supporting information including publicity, become the property of The Arise Charitable Trust, and they shall have discretionary authority in all matters pertaining to these awards.

I understand that this award may be taxable in the United States. Recipients in other areas should also check their local tax laws.

I certify that the information in this application is complete and accurate to the best of my knowledge, and I will notify the Arise Charitable Trust if there are any changes.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*\*\*ATTACHMENTS REQUIRED\*\*\*\*\***

1. FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA)
2. YOUR LATEST FEDERAL INCOME TAX RETURN
3. IF A PRIOR ARISE RECIPIENT, YOUR LATEST GRADE REPORT

**PLEASE NOTE THAT THOSE APPLICATIONS RECEIVED THAT ARE NOT COMPLETE WILL NOT BE CONSIDERED IN THE UPCOMING FUNDING SESSION.**