

## Kalamazoo Community Foundation General Scholarship Financial Information Summary

The following must be completed by the **Scholarship Applicant** before taking this form to the Financial Aid Office:

I authorize the college/university listed below to release the information requested below to the Kalamazoo Community Foundation for consideration during the scholarship selection process.

Name of Student Address									
City/State/Zip Student College ID # Student Signature Parent Signature		Email							
		Phone Date Date	- / /	- / /					
					The following must be completed by th	e Financial Aid O	Office:		
					The student named above is applying	or a Kalamazoo (	Community Foun	dation	scholarship.
Please complete the information below		•		•					
Community Foundation									
Email: scholarships@kalfound.org   Sec	uro Eav. 240 585 <sup>-</sup>	7070							
<u>-maii</u> , scholaiships@kalloona.org   <u>sec</u>	<u>016 1 0x</u> . 207.303.7	/							
Scholarship									
Kalamazoo Community Foundation									
Kalamazoo Community Foundation 402 East Michigan Avenue									
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Kalamazoo Community Foundation 402 East Michigan Avenue Kalamazoo, MI 49007-3888 269.381.4416	on using the met	thodology applic	able to	o an					
Kalamazoo Community Foundation 402 East Michigan Avenue Kalamazoo, MI 49007-3888	on using the met	thodology applic	able to	o an					
Kalamazoo Community Foundation 402 East Michigan Avenue Kalamazoo, MI 49007-3888 269.381.4416 Please enter the results of your calcula	on using the met	thodology applic	able to	o an					
Calamazoo Community Foundation 402 East Michigan Avenue Calamazoo, MI 49007-3888 269.381.4416 Please enter the results of your calcular external scholarship award.	on using the met	thodology applic	able to	o an					
Kalamazoo Community Foundation 402 East Michigan Avenue Kalamazoo, MI 49007-3888 269.381.4416 Please enter the results of your calcular external scholarship award. College Cost/Budget for 2023/2024	\$ \$ \$	thodology applic	able to	an					
Calamazoo Community Foundation 402 East Michigan Avenue Calamazoo, MI 49007-3888 269.381.4416  Please enter the results of your calcular external scholarship award.  College Cost/Budget for 2023/2024 Parent Contribution	on using the met	thodology applic	able to	an					
Kalamazoo Community Foundation 402 East Michigan Avenue Kalamazoo, MI 49007-3888 269.381.4416  Please enter the results of your calcular external scholarship award.  College Cost/Budget for 2023/2024 Parent Contribution  Student Contribution	\$ \$ \$ \$								

Student College ID #:

**To the Financial Aid Office**: Information for the 2023/2024 academic year should reflect the aid package offered to the student.

Gift Aid	Amount Offered
College Gift Aid	
Grants	\$
Scholarships	\$
Federal Grants/Pell & SEOG	\$
Michigan Competitive or Tuition Grant	\$
Outside Scholarships, Grants or Gifts	\$
Kalamazoo Promise (for MI colleges &	
universities only)	_\$
Self-help Aid	Amount Offered
Federal Stafford Loan (subsidized only)	\$
Federal Perkins Loan	\$
Institutional Loan	\$
Federal Work-Study (FWS)	\$
Other	\$
Estin	\$ \$ nated information, verification pending nated information, no verification pending fied information
Name of person completing this form	
Title	Phone
Email	Fax
College/University	
Address	
City/State/Zip	