Part 2: To Be Completed By Parents or Guardians (List on an annual basis)

Father (or Guardian)	Mother (or Guardian)
Name:	Name:
Home Address:	Home Address:
City/State/Zip Code:	City/State/Zip Code:
Employer or Firm:	Employer or Firm:
Type of Business:	Type of Business:
Position: Yrs. In Firm:	Position: Yrs. In Firm: _
Annual Salary (Before Taxes): \$	Annual Salary (Before Taxes): \$
Other income: \$	Other income: \$
Explain any extraordinary expenses or indebtedness:	
explain any extraordinary expenses of indebtedness.	

IMPORTANT: YOU MUST SUBMIT A CURRENT TAX RETURN WITH THIS APPLICATION.