

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

Father (or Guardian)

Name: _____

Home Address: _____

City/State/Zip Code: _____

Employer or Firm: _____

Type of Business: _____

Position: _____ Yrs. In Firm: ____

Annual Salary (Before Taxes): \$_____

Other income: \$_____

Mother (or Guardian)

Name: _____

Home Address: _____

City/State/Zip Code: _____

Employer or Firm: _____

Type of Business: _____

Position: _____ Yrs. In Firm: ____

Annual Salary (Before Taxes): \$_____

Other income: \$_____

Explain any extraordinary expenses or indebtedness:

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