New York University School of Law Foundation 2015-2016 Children's Scholarship Program Application

(Please complete all information)

Child I	nformation:				
Name: _	Last Name , First Nan		Social Securi	ity Number:	
Date of	Birth: Pern	nanent Address:	Apt.	City State	Zip Code
	Phone Number: ()		πpι.	City State	Zip Coue
	Area Code Number				
	Guardian Information:		CCM CD	./C 1:	
Name o	f Parent/Guardian (NYU employee):		_ SSN of Pa	rent/Guardian:	
Tuition	and Expense Information:				
Request	for: [] Academic Year [] Fall 2015 of	only [] Spring 2016 only			
Please c	complete the following to the best of you	our knowledge:			
			0.1 0	4.10	_
		Actual or Approximate Cost of Attendance, 2015-2016	2015-2016	ant or Aid Sources,	
	Tuition	,		-	
	Room and Board				
	Health Insurance				
	Books/Course Supplies				
	Transportation/Parking Expenses				
	Fees				
School	<u>Information:</u>				
Child's	Grade Level: [] Kindergarten [] Se	econdary School, Grade			
	[] Flamentary School	Grade [] College, Year			
	•				
Name o	f School:	School Phone Nu	mber: ()	-	
School Address: Street Address		City	State	Zip Code	
Lagutify	that (Name of Child)	and I mast the clicibility	ma avvinam am ta	for morticipation in th	NVII Caba
of Law 1		and I meet the eligibility ogram. I certify that, to the best of my l	•		
correct					
correct.					

(1) Official statement of tuition from school, setting out tuition separately from other fees. If bills or contracts have not been issued for 2015-2016, you are responsible for contacting the school and obtaining this information.

The award will NOT be processed without an official tuition statement.

Please return the completed application form, with all required attachments, by May 1, 2015 to:

Amy.wright-parra@nyu.edu, NYU School of Law, 110 West 3rd Street, 2nd floor, New York, NY 10012. (212) 998-6103. This form is also available in fill-in enabled pdf format under Children's Scholarship Program on the HR webpage (http://www.law.nyu.edu/hr).