



RONALD REAGAN

STUDENT LEADERSHIP PROGRAM

The Ronald Reagan Student Leadership Program Scholarship Application

Dear Parent/Guardian,

Scholarship applications can be submitted starting January 1, 2018 and will be accepted through April 12, 2018. Amounts are determined according to financial need and will be awarded on a first-come, first-serve basis. Scholarship applications will not be considered if the student has not completed the 2018 Ronald Reagan Student Leadership Program Application with all required documents submitted. We will notify you of the status of your application, via email, no later than May 1, 2018.

If you have any questions, please email me at the information below.

Warm Regards,

Stacy Macris-Ros

Program Coordinator, The Ronald Reagan Student Leadership Program

The Ronald Reagan Presidential Foundation and Institute

40 Presidential Drive, Simi Valley, CA 93065

Phone: (805) 577- 4096

smacrisros@reaganfoundation.org



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Confidential Financial Aid Application

Part 1 – Parent/Guardian Information

Name _____

Parent/Guardian (1) _____ Home Phone _____ Cell _____

Parent/Guardian (2) _____ Home Phone _____ Cell _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address (1) _____ Email Address (2) _____

Does your student qualify for free/reduced school lunches? _____

Application is for (please check one): ____ 1/2 Scholarship ____ Full Scholarship

Please list all dependents living in your household:

<u>Name:</u>	<u>Relationship:</u>	<u>DOB:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Part 2 – Parent/Guardian Employment Information

Are you currently employed? [] Yes [] No

Employer _____ Spouse’s Employer _____

Occupation _____ Occupation _____

Month/years with employer _____ Month/years with employer _____



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Part 3 – Parent/Guardian Income Information – Please provide a copy of your 2016 W-2 or IRS Form 1040

Monthly Gross Income \$ _____ Spouses Monthly Gross Income \$ _____

Please list additional income (i.e. Child Support, SSI, Alimony, Food Stamps, other)

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Part 4 – Expenses

In addition to your normal expenses, please list any extraordinary expenses you have:

_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____



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Part 5 – Other Information

Is there any other information you would like us to know as it pertains to this scholarship request?

Parent/Guardian Name (Printed) _____

Parent/Guardian Signature _____ Date _____

Please Mail or Fax your completed application along with a copy of your 2016 W-2 or IRS Form 1040 to:

**The Ronald Reagan Student Leadership Program
Ronald Reagan Presidential Foundation and Institute
40 Presidential Drive, Simi Valley, CA 93065
Fax: (805) 577-4158**