



**BASIC INFORMATION**

**DEADLINE TO APPLY: January 31, 2020**

Please submit completed applications to Breanna McKercher at [Breanna.McKercher@ucdenver.edu](mailto:Breanna.McKercher@ucdenver.edu)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Current University & Location: \_\_\_\_\_

Current University's Federal School Code: \_\_\_\_\_

Expected Degree & Area(s) of Study: \_\_\_\_\_

Expected Degree Completion Date: \_\_\_\_\_

Have you already earned a Bachelor's Degree?                      Yes                      No

*If yes, then please complete questions a through d. If no, please skip questions a through d.*

a. Bachelor's Degree University's Name & Location:

\_\_\_\_\_

b. Bachelor's Degree University's Federal School Code:

c. Years Attended:

d. Degree & Area(s) of Study:

\_\_\_\_\_

Please list any other degrees you have earned, area(s) of study, degree completion dates, & universities' names & federal school codes:

\_\_\_\_\_

## FINANCIAL INFORMATION

Please report income honestly. This course is not eligible for financial aid. **Please do not contact the University of Colorado Financial Aid office. All income information will be verified prior to receiving scholarship. Deliberate discrepancies will lead to automatic disqualification.** If any question is unable to be answered, please report "N/A" on the appropriate line and explain on page 5. You will not be seen as a financial independent unless the federal government deems you to be. For more information concerning financial independent status, go here:

<http://www.fastweb.com/financial-aid/articles/federal-financial-aid-and-the-independent-student>

Mother's/Guardian's Most Recent Gross Annual Income (USD):

\_\_\_\_\_

Father's/Guardian's Most Recent Gross Annual Income (USD):

\_\_\_\_\_

Applicant's Most Recent Gross Annual Income (USD): \_\_\_\_\_

Spouse's Most Recent Gross Annual Income (USD): \_\_\_\_\_

*\* If you or your parents/guardians filed an IRS tax return, gross annual income will be recorded on IRS form 1040—line 22, Form 1040A—line 18, or Form 1040EZ—line 4*

Were you awarded a Pell Grant for this academic year?      Yes      No

Have you ever been awarded a Pell Grant in the past?      Yes      No

If so, when? \_\_\_\_\_

Indicate percentages of aid from your current Financial Aid package:

\_\_\_\_\_ % Grants      \_\_\_\_\_ % Scholarships      \_\_\_\_\_ % Loans      \_\_\_\_\_ % Parental Contribution

\_\_\_\_\_ % Other—Describe: \_\_\_\_\_

Total Family Size, including yourself, parents/guardians, spouse, siblings, children, and other legal dependents:

\_\_\_\_\_

Number of persons within family attending full-time higher education this academic year (include self):

\_\_\_\_\_

Are your parents/guardians:      Married?                  Divorced?                  Separated?                  Single?  
Other: \_\_\_\_\_

Are you:                                  Married?                  Divorced?                  Separated?                  Single?  
Other: \_\_\_\_\_

Do your parents/guardians currently rent or own their place(s) of dwelling (check all that apply)?

Own                  Rent                  Other: \_\_\_\_\_

How many properties do your parents/guardians own? \_\_\_\_\_

What is the total value of all the properties owned by your parents/guardians (in USD)?

\_\_\_\_\_

Where do you live during the academic year?

I live in school housing.                  I rent.                  I own my home.

Other: \_\_\_\_\_

If you rent during the academic year, what is your monthly rental payment (in USD)?

\_\_\_\_\_

If you rent during the academic year, does financial aid cover any of your housing or board costs? If yes, how much is covered by Financial Aid (in USD)?

\_\_\_\_\_

\_\_\_\_\_

If you own any properties, how many properties do you own & what is the total value of all your properties (in USD)?

\_\_\_\_\_

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**THE FOLLOWING QUESTIONS ARE OPTIONAL**

Year of Birth & Age: \_\_\_\_\_

Gender:      Female                      Male                      Other—Please Describe: \_\_\_\_\_

Race/Ethnicity (check all that apply):

Hispanic, Chicano, Mexican, Latino, Cuban, Puerto Rican, Central or South American

Black or African-American

Asian

White

Pacific Islander or Native Hawaiian

American Indian, Alaska Native, Aboriginal

Other—Please Describe: \_\_\_\_\_

Is English your native language?      Yes      No      If no, what is your primary language? \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Parents'/Guardians' Country of Birth

Father/Guardian: \_\_\_\_\_      Mother/Guardian: \_\_\_\_\_

Family Education Background—Indicate highest level of formal education attained by parents or legal guardians (check all that apply):

Less than high school graduate

Bachelor's Degree

High school graduate or equivalent

Master's Degree

2-year college degree or tech school

PhD

Parents'/Guardians' Occupation and/or Place of Work:

Father/Guardian: \_\_\_\_\_

Mother/Guardian: \_\_\_\_\_



I ATTEST THAT TO THE BEST OF MY KNOWLEDGE, THE INFORMATION SUBMITTED ON THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT IF FOUND TO BE OTHERWISE, IT IS SUFFICIENT CAUSE FOR REFUSAL OR DISMISSAL FROM THE PROGRAM.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN ALL APPLICATIONS TO Breanna  
McKercher AT  
[Breanna.McKercher@UCDENVER.EDU](mailto:Breanna.McKercher@UCDENVER.EDU)



School of Medicine

UNIVERSITY OF COLORADO  
ANSCHUTZ MEDICAL CAMPUS

*If you have any questions concerning the application process please contact the course coordinator Breanna McKercher at [Breanna.McKercher@ucdenver.edu](mailto:Breanna.McKercher@ucdenver.edu).*