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**American Association of Teachers of German, Inc.**

112 Haddontowne Court #104, Cherry Hill, NJ 08034

Telephone: 856-795-5553 ♦ Fax: 856-795-9398

info@aatg.org ♦ www.aatg.org

## **2017 German Summer Study Program for High School Students**

### **Need-based Scholarship Application**

Each year the AATG provides scholarships of up to 25% of total program cost to students whose financial need merits such support. Deadline for application is **April 1, 2017**.

#### **Eligibility**

1. You must have submitted your complete application materials for the AATG German Summer Study Program.
2. You must be in financial need as verified by proper documents.

#### **Required Materials**

1. **Scholarship Application** completed by student and parent/guardian
2. **Photocopy of parent/guardian's most recent Federal Income Tax Return** showing adjusted gross income, or other proof-of-income documents if no return was filed
3. **Scholarship Recommendation Form** completed by your teacher, counselor, administrator, employer, etc.

Send application materials to Program Coordinator April Hemphill, [april@aatg.org](mailto:april@aatg.org) or mail to AATG, 112 Haddontowne Court #104, Cherry Hill, NJ, 08034.

#### **Notification of Award**

AATG will notify scholarship recipients of the award amounts in April. Recipient's accounts will be credited at the time of final billing.

Students must be paid in full 6 weeks prior to departure or the scholarship may be withdrawn.

# 2017 German Summer Study Program for High School Students

## Need-based Scholarship Application

### Section 1 – To be completed by student

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Indicate the percentage of the AATG German Summer Study Program cost that comes from the following sources (for instance 50% from parents, 50% from your work):

Parents _____%	Loan _____%
Your Work _____%	Other _____% Specify _____
Your Savings _____%	

What income-generating work have you done to help make possible your participation in the AATG German Summer Study Program?

What circumstances make you a candidate for financial aid?

Please ask your teacher, counselor, administrator, employer, etc. to complete the Scholarship Recommendation Form for you.

**Section 2– To be completed by parent or guardian**

*Please attach a copy of the page of your most recent Federal Income Tax Return (2015 or 2016) that shows your adjusted gross income. If you were not required to file an income tax return, please state the reason why and attach documents to show proof of income sources (copy of pay stub, unemployment check, etc.).*

Student lives with  Both parents     One parent     Other \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Occupation \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Occupation \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Adjusted Gross Income for documented tax year \_\_\_\_\_

Number of dependent children in your household during documented tax year \_\_\_\_\_

The information given on this application is complete and accurate.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date