



TOZER FOUNDATION

For Tozer Office Use Only		
C-GPA	EFC	File #

Scholarship Application for Renewing Current Recipients

Part I - Personal information

Name _____
 Last Name First Name Middle Name

Home Address _____
 Number and Street

City State Zip County

Is this a new address? Yes No

Date of Birth _____
 (mm/dd/yyyy)

Telephone _____
 Home Cell

eMail _____

High School _____
 Name City County Year of Graduation

I wish to re-apply for a Tozer Scholarship for the _____ school year.

This year I attended _____ Student ID # _____
 College Name

Next year I plan to attend _____ Student ID # _____
 College Name

Part II - Estimated College Budget

ESTIMATED EXPENSES	
Tuition and fees	\$
Room and board	
Books and supplies	
Clothing	
Incidentals (e.g., transportation, recreation, laundry, charities and miscellaneous)	
Total	\$

ESTIMATED RESOURCES	
Estimated savings as of next Sept 1 st	\$
Assistance from parents, estate and relatives	
From loans, scholarships and grants	
From other sources (specify)	
From part-time work during academic year	
Total	\$
Needed to balance the budget (expenses minus resources)	\$



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Part III - School and Community Activities

Describe the activities you have participated in during the school year, including part-time work, the nature of the work, etc. Attach additional page, if necessary.

Part IV - Deadlines for Completing Your Application

Before March 1

Your completed application should be returned directly to Tozer Foundation and include:

- Completed Scholarship Application for Renewing Current Recipients (this form)
- Current official college transcript

- Your FAFSA on the Web Submission Confirmation page and cover sheet (see the last page of this application).

Part V - Authorization and Certifications

I authorize the school I attend to release information needed to verify all information in this application. I certify that the information and statements in this application are true and correct.

Signature of Applicant _____ Date _____

Signature of Parent _____ Date _____

Please contact the Tozer Foundation office (651-439-1530 or info@tozerfoundation.com) if you have any questions.



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FAFSA on the Web Submission Confirmation

Name _____ Date of Birth _____
Last First (mm/dd/yyyy)

Submit this cover page and a copy of your FAFSA on the Web Submission Confirmation before March 1 **directly** to Tozer Foundation 1213 1/2 Fifth Avenue South Stillwater, MN 55082

- My FAFSA Expected Family Contribution (EFC) is \$ _____
- Attached is a copy of my FAFSA on the Web Submission Confirmation

Visit <http://www.fafsa.ed.gov> to complete your FAFSA disclosure and obtain your Web Submission Confirmation.

Important Privacy Note: For confidentiality/privacy reasons, please redact your confirmation number (your Social Security Number) by blacking out the number.

FAFSA Certifications

I certify that information and statements set forth above are true and correct.
I agree to provide Tozer Foundation with any corrections or updates FAFSA makes to my Expected Family Contribution.

Signature of Applicant _____ Date _____

Signature of Parent _____ Date _____