

NAME KIROS, LIULTY

- Application Complete
- FIMS
- Spreadsheet

**SAMUEL L. ABRAMS FOUNDATION
DEADLINE MAY 31**

New Applicant Re-applicant

CHECKLIST:

Graduated from one of the following schools:

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Bishop McDevitt <input type="checkbox"/> Camp Hill <input type="checkbox"/> Cedar Cliff <input checked="" type="checkbox"/> CD East <input type="checkbox"/> Central Dauphin <input type="checkbox"/> Cumberland Valley <input type="checkbox"/> Harrisburg <input type="checkbox"/> Lower Dauphin <input type="checkbox"/> Mechanicsburg | <ul style="list-style-type: none"> <input type="checkbox"/> Middletown <input type="checkbox"/> Red Land <input type="checkbox"/> Sci-Tech <input type="checkbox"/> Steel-High <input type="checkbox"/> Susquehanna Township <input type="checkbox"/> Susquenita <input type="checkbox"/> Harrisburg Academy <input type="checkbox"/> Rabbi David L. Silver Yeshiva Academy <input type="checkbox"/> Trinity |
|--|---|

Completed Application

- Other Scholarship Information
- Student Resume
- FAFSA SAR EFC: 0
- Letter of Extenuating Circumstances
- Essay

- Tuition Bill
- Financial Aid Information
- Transcript GPA: _____
- School Counselor Form (only if HS applicant)

NOTES:

Samuel L. Abrams Foundation Scholarship Application

Applicant Information

Please use proper capitalization, i.e. John A. Smith, not JOHN A SMITH or john a smith

Prefix e.g., Mr., Miss, Ms., Mrs. Ms	First Name Liulty	Middle Initial K	Last Name Kiros	Suffix e.g., Jr.
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Pronoun
e.g., he, she, they
she

Nickname or Preferred Name

Address 1 Street Address 628 Hoffman Drive	Address 2 Apt./Unit #
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City Harrisburg	County Dauphin County	State Pennsylvania	Zip Code 17111
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Phone
XXX-XXX-XXXX
202-509-7048

E-mail Address
Please provide an e-mail address you will continue to check throughout the year
liultykiros2@gmail.com

Date of Birth April 18, 2001	Gender Female	U.S. Citizen Yes
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Are you Married? No	Name of Spouse if applicable
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Number of Dependents and Age(s)
if applicable

Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

Uncle

Prefix e.g., Mr., Miss, Ms., Mrs. Mr	First Name Malik	Middle Initial K	Last Name DeFreitas
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Pronoun

e.g., he, she, they
he

Employer The Depot	Occupation Distribution Process Worker
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Address 1 Home Address 628 Hoffman dr	Address 2 Apt./Unit #
---	--------------------------

City Harrisburg	State PA	Zip 17111
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Home Phone xxx-xxx-xxxx 7174128561	Work Phone xxx-xxx-xxxx	Cell Phone xxx-xxx-xxxx
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E-mail Address

Please provide an e-mail address that is checked regularly

Parent 2 / Caregiver 2

Relationship to Applicant

Aunt

Prefix e.g., Mr., Miss, Ms., Mrs. Ms	First Name Jennifer	Middle Initial K	Last Name Tate-DeFreitas
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Pronoun

e.g., he, she, they
she

Employer Homeland Center	Occupation Head Nurse
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Address 1 Home Address 628 Hoffman dr.	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	State PA	Zip 17111
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Home Phone	Work Phone	Cell Phone
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XXX-XXX-XXXX
7178568442

XXX-XXX-XXXX

XXX-XXX-XXXX

E-mail Address

Please provide an e-mail address that is checked regularly

Liultykiros2@gmail.com

Father Deceased?

Yes

Mother Deceased?

No

Parents Divorced?

Yes

Are you the first in your family to attend college?

No

List names, ages, and educational levels of siblings living in your household:

Name, Age, Grade, or Year in College & Name of College

Liulty K Kiros

Please provide any additional information regarding your family, if necessary:

High School Information

High School Attending

Central Dauphin East

High School Address 1

626 Rutherford rd

High School Address 2

City

Harrisburg

State

Pennsylvania

Zip Code

17109

High School Graduation Date

June 03, 2019

Cumulative GPA

4.0

Cumulative Class Rank

41

Total H.S. Class Size

342

Please provide your school counselor's name and contact information below.

Prefix

e.g., Mr., Miss, Ms., Mrs.

First Name

Stephen

Last Name

Numbis

Phone

XXX-XXX-XXXX

E-mail Address

Post-Secondary Information & Educational Financing

Please list the colleges/universities to which you have applied and indicate your acceptance status.

College/University 1

Acceptance Status

<None>

College/University 2

Acceptance Status

<None>

College/University 3

Acceptance Status

<None>

Year in college for upcoming school year

Sophomore

Major and minor field of study

business

Check this box if you plan to be a full-time student.

Yes

If you do not plan to be a full-time student,

how many credit hours are you planning to take?

Expected College Graduation Date

May 23, 2023

Please provide educational financing information for the school you will attend in the fall.

If you are unsure of what school you will attend, please provide information for your first choice school.

ALL DOLLAR FIGURES SHOULD REFLECT EXPENSES FOR ONE FULL ACADEMIC YEAR

School

Clark Atlanta University

Expected Annual Tuition & Fees

Total dollar figure for both fall & spring semesters

25,000

Expected Annual Room & Board

Total dollar figure for both fall & spring semesters

14,632

Expected Annual Textbooks & Supplies

Total dollar figure for both fall & spring semesters

400

Where do you plan to live during the school year?

Please indicate if you will be living in campus housing, commuting, living off campus etc.

on campus housing

Are you financing your own education?

Yes

How much of your education are you financing?

dollar figure for one academic year

If no or partial, who is helping to finance your education?

How much of your education are they supporting per year?

dollar figure for one academic year

Do you plan to take out student loans for the upcoming year?

Loans include federal subsidized, unsubsidized, and private loans

No

If yes, how much?

dollar figure

Do you plan to have employment during the academic year?

Employment includes participating in a work study program and private employment

Yes

If yes, how many hours will you work per week? How much will you earn?

Include hours and dollar figure

Use the space below to describe how you will finance the total of your education and provide any clarification needed for the answers given above.

I plan on working during the summer to pay my first fee for college. I then hope to obtain a job somewhere near my school with intentions to continue to pay for my education.



OTHER SCHOLARSHIP INFORMATION

Please list all other scholarships you have applied for (attach an additional sheet of paper if more space is needed):

Table with columns: Scholarship Name, Received (Yes/No/Pending), Amount: \$



STUDENT RESUME

List any school, community and church activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
Internship	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6 months	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	100
Tennis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3 years	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	varies
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Community & Church Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
Brainfood cooks in training	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3 months	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	69
Brainfood community cooking coaches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8 months	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	59
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Awards & Honors	HS	C	FR	SO	JR	SR	Year
National Honors society nominee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2017-2018
Most improved tennis player	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2016-2017
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Work Experience		Dates of Employment		Average Hours Worked Per Week
Employer	Position			
Marrion Barry Youth leadership institute	youth leader	6/25/2018		25

2019-2020

Electronic Student Aid Report (SAR)

The SAR summarizes the information you submitted on your 2019-2020 Free Application for Federal Student Aid (FAFSA).

Application Receipt Date:	10/14/2018	XXX-XX-6123 KI 02
Processed Date:	03/07/2019	EFC: 0
		DRN: 8951

Comments About Your Information

Learn about federal tax benefits for education, including the *American Opportunity Tax Credit (AOTC)*.

Based on the information we have on record for you, your EFC is 0. You may be eligible to receive a Federal Pell Grant and other federal student aid. Your school will use your EFC to determine your financial aid eligibility for federal grants, loans, and work-study, and possible funding from your state and school.

There is a limit to the total amount of Federal Pell Grants that a student may receive, which is the equivalent of 6 school years. Once a total amount of Pell Grant eligibility has been received, a student can no longer receive Pell Grant aid.

WHAT YOU MUST DO NOW (Use the checklist below to make sure that all of your issues are resolved.)

If you need to make corrections to your information, click 'Make FAFSA Corrections' on the 'My FAFSA' page using your FSA ID. If you need additional help with your SAR, contact your school's financial aid office or click the 'Help' icon on the FAFSA home page. If your mailing address or e-mail address changes, you can make the correction online.

Based on your EFC of 0, you may be eligible to receive a Federal Pell Grant of up to \$6,095 for the 2019-2020 school year provided you have not met or exceeded the lifetime limit established for the Federal Pell Grant program.

FAFSA Data

Assumed fields, based on the data you entered, are marked with an "*" (asterisk) sign.

1. Student's Last Name:	KIROS
2. Student's First Name:	LIULTY
3. Student's Middle Initial:	K
4. Student's Permanent Mailing Address:	628 HOFFMAN DR.
5. Student's Permanent City:	HARRISBURG
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17111
8. Student's Social Security Number:	XXX-XX-6123
9. Student's Date of Birth:	04/18/2001
10. Student's Telephone Number:	(202) 509-7048
11. Student's Driver's License Number:	
12. Student's Driver's License State:	
13. Student's E-mail Address:	liultykiros2@gmail.com
14. Student's Citizenship Status:	YES, I AM A U.S. CITIZEN (OR U.S. NATIONAL)
15. Student's Alien Registration Number:	
16. Student's Marital Status:	I AM SINGLE
17. Student's Marital Status Date:	
18. Student's State of Legal Residence:	DC
19. Was Student a Legal Resident Before January 1, 2014?	YES
20. Student's Legal Residence Date:	
21. Is the Student Male or Female?	FEMALE
22. Register Student With Selective Service System?	
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	COLLEGE OR BEYOND
25. Parent 2 Educational Level:	COLLEGE OR BEYOND
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	CENTRAL DAUPHIN EAST SHS
27b. Student's High School City:	HARRISBURG
27c. Student's High School State:	PA
28. First Bachelor's Degree before 2019-2020 School Year?	NO
29. Student's Grade Level in College in 2019-2020:	NEVER ATTENDED COLLEGE/1ST YR.
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	DON'T KNOW
32. Student Filed 2017 Income Tax Return?	NOT GOING TO FILE
33. Student's Type of 2017 Tax Form Used:	
34. Student's 2017 Tax Return Filing Status:	
35. Student Eligible to File a 1040A or 1040EZ?	
36. Student's 2017 Adjusted Gross Income:	
37. Student's 2017 U.S. Income Tax Paid:	
38. Student's 2017 Exemptions Claimed:	
39. Student's 2017 Income Earned from Work:	\$0
40. Spouse's 2017 Income Earned from Work:	
41. Student's Total of Cash, Savings, and Checking Accounts:	\$0
42. Student's Net Worth of Current Investments:	\$0
43. Student's Net Worth of Businesses/Investment Farms:	\$0
44a. Student's Education Credits:	
44b. Student's Child Support Paid:	\$0
44c. Student's Taxable Earnings from Need-Based Employment Programs:	\$0
44d. Student's College Grant and Scholarship Aid Reported to IRS as Income:	\$0
44e. Student's Taxable Combat Pay Reported in AGI:	\$0
44f. Student's Cooperative Education Earnings:	\$0
45a. Student's Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
45b. Student's Deductible Payments to IRA/Keogh/Other:	
45c. Student's Child Support Received:	\$0
45d. Student's Tax Exempt Interest Income:	
45e. Student's Untaxed Portions of IRA Distributions:	
45f. Student's Untaxed Portions of Pensions:	
45g. Student's Housing, Food, & Living Allowances:	\$0
45h. Student's Veterans Noneducation Benefits:	\$0
45i. Student's Other Untaxed Income or Benefits:	\$0
45j. Money Received or Paid on Student's Behalf:	\$0
46. Student Born Before January 1, 1996?	NO
47. Is Student Married?	NO
48. Working on Master's or Doctorate in 2019-2020?	NO
49. Is Student on Active Duty in U.S. Armed Forces?	NO
50. Is Student a Veteran?	NO
51. Does Student Have Children He/She Supports?	NO
52. Does Student Have Dependents Other than Children/Spouse?	NO
53. Parents Deceased?/Student Ward of Court?/In Foster Care?	YES
54. Is or Was Student an Emancipated Minor?	
55. Is or Was Student in Legal Guardianship?	
56. Is Student an Unaccompanied Homeless Youth as Determined by High School/Homeless Liaison?	
57. Is Student an Unaccompanied Homeless Youth as Determined by HUD?	
58. Is Student an Unaccompanied Homeless Youth as Determined by Director of Homeless Youth Center?	
59. Parents' Marital Status:	WIDOWED
60. Parents' Marital Status Date:	08/2018
61. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	

62. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	
63. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	
64. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	
65. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-4755
66. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	KIROS
67. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	K
68. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	12/18/1975
69. Parents' E-mail Address:	kirosfamily@gmail.com
70. Parents' State of Legal Residence:	DC
71. Were Parents Legal Residents Before January 1, 2014?	YES
72. Parents' Legal Residence Date:	
73. Parents' Number of Family Members in 2019-2020:	2
74. Parents' Number in College in 2019-2020 (Parents Excluded):	1
75. Parents Received Medicaid or Supplemental Security Income?	
76. Parents Received SNAP?	
77. Parents Received Free/Reduced Price Lunch?	
78. Parents Received TANF?	
79. Parents Received WIC?	
80. Parents Filed 2017 Income Tax Return?	NOT GOING TO FILE
81. Parents' Type of 2017 Tax Form Used:	
82. Parents' 2017 Tax Return Filing Status:	
83. Parents Eligible to File a 1040A or 1040EZ?	
84. Is Parent a Dislocated Worker?	
85. Parents' 2017 Adjusted Gross Income:	
86. Parents' 2017 U.S. Income Tax Paid:	
87. Parents' 2017 Exemptions Claimed:	
88. Parent 1 (Father's/Mother's/Stepparent's) 2017 Income Earned from Work:	
89. Parent 2 (Father's/Mother's/Stepparent's) 2017 Income Earned from Work:	\$0
90. Parents' Total of Cash, Savings, and Checking Accounts:	\$0
91. Parents' Net Worth of Current Investments:	\$0
92. Parents' Net Worth of Businesses/Investment Farms:	\$0
93a. Parents' Education Credits:	
93b. Parents' Child Support Paid:	\$0
93c. Parents' Taxable Earnings from Need-Based Employment Programs:	\$0
93d. Parents' College Grant and Scholarship Aid Reported to IRS as Income:	\$0
93e. Parents' Taxable Combat Pay Reported in AGI:	\$0
93f. Parents' Cooperative Education Earnings:	\$0
94a. Parents' Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
94b. Parents' Deductible Payments to IRA/Keogh/Other:	
94c. Parents' Child Support Received:	\$0
94d. Parents' Tax Exempt Interest Income:	
94e. Parents' Untaxed Portions of IRA Distributions:	
94f. Parents' Untaxed Portions of Pensions:	
94g. Parents' Housing, Food, & Living Allowances:	\$0
94h. Parents' Veterans Noneducation Benefits:	\$0
94i. Parents' Other Untaxed Income or Benefits:	\$0
95. Student's Number of Family Members in 2019-2020:	1
96. Student's Number in College in 2019-2020:	1
97. Student Received Medicaid or Supplemental Security Income?	
98. Student Received SNAP?	
99. Student Received Free/Reduced Price Lunch?	
100. Student Received TANF?	
101. Student Received WIC?	
102. Is Student or Spouse a Dislocated Worker?	
103a. First Federal School Code:	003732
103b. First Housing Plans:	ON CAMPUS
103c. Second Federal School Code:	003714
103d. Second Housing Plans:	ON CAMPUS
103e. Third Federal School Code:	001480
103f. Third Housing Plans:	ON CAMPUS
103g. Fourth Federal School Code:	001428
103h. Fourth Housing Plans:	ON CAMPUS
103i. Fifth Federal School Code:	001559
103j. Fifth Housing Plans:	ON CAMPUS
103k. Sixth Federal School Code:	001594
103l. Sixth Housing Plans:	ON CAMPUS
103m. Seventh Federal School Code:	002629
103n. Seventh Housing Plans:	ON CAMPUS
103o. Eighth Federal School Code:	003277
103p. Eighth Housing Plans:	ON CAMPUS
103q. Ninth Federal School Code:	002905
103r. Ninth Housing Plans:	ON CAMPUS
103s. Tenth Federal School Code:	002439
103t. Tenth Housing Plans:	ON CAMPUS
104. Date Completed:	10/14/2018
105. Signed By:	STUDENT
106. Preparer's Social Security Number:	
107. Preparer's Employer Identification Number (EIN):	
108. Preparer's Signature:	

Graduation/Retention/Transfer Rates

College Rates

The table shows the graduation, retention, and transfer rates for the schools you selected. Go to the College Scorecard Web site for complete information.

School Name	Graduation Rate	Retention Rate	Transfer Rate	Additional Information from <i>College Scorecard</i>
RADFORD UNIVERSITY	59%	75%	33%	N/A
HAMPTON UNIVERSITY	60%	81%	21%	N/A
FLORIDA A & M UNIVERSITY	40%	84%	3%	N/A
DELAWARE STATE UNIVERSITY	42%	72%	0%	N/A
CLARK ATLANTA UNIVERSITY	38%	67%	0%	N/A
SPELMAN COLLEGE	76%	91%	13%	N/A
RUTGERS, THE STATE UNIVERSITY OF NJ	80%	93%	11%	N/A
INDIANA UNIVERSITY OF PENNSYLVANIA	54%	75%	15%	N/A
NORTH CAROLINA A&T STATE UNIV	44%	75%	18%	N/A
TOUGALOO COLLEGE	42%	71%	8%	N/A

Your Financial Aid History Information

The information below is the total amount of student loans that you owe. These loans are administered by the U.S. Department of Education (ED). You should confirm that these loan totals are correct. You can view details on the individual loans that make up these totals at the [National Student Loan Data System \(NSLDS\)](#) Web site. If you feel that the amounts listed on this page are incorrect, or you have other questions related to a loan, you should contact the loan servicer indicated on the NSLDS Web site. You can obtain general information about each of the types of loans that are listed below by visiting our [StudentAid.gov](#) Web site.

Note that the "Subsidized" and "Unsubsidized" amounts include the appropriate portions of any Consolidation Loans you may have. If there is an amount listed for "Unallocated Consolidation Loans" it is because we could not determine whether those balances were subsidized or unsubsidized.

Remember you are responsible for repaying all of the amounts that you borrow, plus interest. As a general rule, with an assumed interest rate of 5%, the monthly payment amount over a ten-year repayment period would be approximately \$10.61 for every \$1,000 that you borrowed. Of course your actual repayment amount will depend upon how much you borrow, the interest rate when you enter repayment, and how long your repayment term is.

Total Amount of Loans Outstanding -			
FFEL (Bank Loans) and/or Direct Loans:	Total Principal Balance	Remaining Amount to be Disbursed	Total
Subsidized Loans:			
Unsubsidized Loans:			
Combined Loans:			
Unallocated Consolidation Loans:			
Federal Perkins Loan Amounts:			
Total Outstanding Principal Balance:			
2019-2020 Loan Amount:			
TEACH Grants Converted to Direct Loans:			
Unsubsidized Loans:			

At this point, the school(s) listed on your application have access to your information. The school(s) may put together or change an aid package based on your Expected Family Contribution and notify you.

The amount of aid you receive from a school will depend on the cost of attendance at that school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional appropriations, and other factors. Review your financial aid notification from the school(s) or contact the Financial Aid Administrator at the school(s).

Note: Your school has the authority to request copies of certain financial documents to verify information you reported on your application.

To protect the confidentiality of your application data, you should never give, share, or disclose your FSA ID to anyone, including commercial service providers that provide assistance with the financial aid process. You should keep your FSA ID in a safe location.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0001. Public reporting burden for this collection of information is estimated to average 5 to 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this form, please contact the Federal Student Aid Information Center, P.O. Box 84, Washington, D.C. 20044 directly.

We may request additional information from you to process your application more efficiently. We will collect this additional information only as needed and on a voluntary basis.

By answering questions 103a through 103t, and signing the Free Application for Federal Student Aid, you give permission to the U.S. Department of Education to provide information from your application to the college(s) you entered. You also agree that such information is deemed to incorporate by reference the certification statement on the sign and submit page of the financial aid application. The certification statement can be viewed at [StudentAid.gov/1920/help/certification-statement](#).

WARNING: If you are convicted of drug distribution or possession for an offense that occurred while you were receiving Title IV aid, your eligibility for Title IV student financial aid is subject to suspension or termination. If your drug conviction status changes at any time during the 2019-2020 award year, you must update your answer to the drug conviction affecting eligibility question.

The summer before I entered 8th grade, my father committed suicide. This was the single most traumatic experience of my life. I was absolutely heartbroken especially because our relationship was so special. My mother was very affected by his death as well. She has suffered from alcoholism for the majority of my life, but after my father's death she started drinking even more heavily to cope with his absence.

My father was my biggest influence and the person who I looked to when I needed to distinguish right from wrong. On one occasion he gave my sister \$5 which she then gave to a homeless man. Consequently, my father gave her \$10. He wanted to teach us that it was important to help others who needed it.

He worked as a computer scientist and loved his job, but it was also very stressful for him. My mother was a stay-at-home-mom, but she struggled because of her alcoholism. In order to make things flow as smoothly as possible for everyone, my father came home from work, cooked and cleaned, and finally finished up some of his incomplete work. He always tried to make time for us to leave home and go to the park so that we were not always stuck at home.

He put everyone else ahead of himself and single handedly soaked up everyone else's stress. Not only did he take on a "super dad" persona in that way, but he was also my best friend. Every morning when I would wake up, the first thing I would do was rush over to him and hug him like I'd never have that opportunity again. We would sing and dance to reggae music throughout the house as we cleaned. We laughed all the time because he was the funniest person I knew. It was, and still is, hard for me to genuinely laugh since his passing. Needless to say, my father meant so much to me. He was my entire world and I am so grateful to have experienced what kind of man he was, but when he died, my whole world came crashing down.

After my father's passing, my older brother moved away and I was left with unexpected responsibilities. I found myself having to be a mother to both my mother and my little sister. I would do things like worry about how we were going to eat, what I could do to help my sister with her classes as well as stay focused on my own grades, and try to deter my mother from drinking so heavily. Although these are all things a child at my age should not have to experience, I felt it was my duty to step in and help my loved ones to the best of my ability. There would often be times where there was no food at home and my sister would beg me to find a way for us to eat. I would be so conflicted and heartbroken, until I thought to call family members to order us food. I have had to witness my mother unconscious and bleeding on the floor with glass all around her after she got drunk and fell through a mirror.

Although sometimes I feel like these experiences robbed me of my childhood, more importantly, they have helped me mature and prepared me to face future challenges.

I am a strong believer in the phrase, "what doesn't kill you makes you stronger." Because of the responsibility I had to take on, I have learned how to be resilient, a team player and how to advocate for myself and others, to sacrifice on behalf of others, how to be disciplined, and a responsible role model for my sister.