

**2022 Tywanza Sanders® Legacy Scholarship  
Financial Needs Worksheet**

Instructions: Type or print the following information regarding your financial need. Scan the signed and completed form and upload the completed worksheet as part of the required scholarship evidence documentation in your application.

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The following information is used by the Tywanza Sanders® Legacy Foundation Scholarship Committee in order to determine a student's financial need. It is required that a student complete this worksheet in order to have a complete scholarship application. This information will be kept confidential and will not be used for any reason other than to support the scholarship application.

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**A. Student's Information**

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Last	First	MI
Email Address	Primary Phone Number	Date of Birth

**B. Family Information**

1. List your parents (step-parents, legal guardians, adoptive parents), and others that your parents financially support (siblings, dependents, etc.). If you need more room than what is provided, please attach an additional sheet with your name and additional family members.

Family Member's Name	Relation to Student	Age	In College?
<i>Jane Doe (example)</i>	<i>Mother</i>	<i>52</i>	<i>no</i>

2. Indicate your parent's 2021 income. *(If they did not have any income in 2021, indicate zero)*

Family Member's Name	Employer	2021 Earned Income
<i>John Doe (example)</i>	<i>SC Department of Transportation</i>	<i>\$38,000</i>

**C. Student's Income Information** *(Please indicate all monetary values in dollars)*

1. If you were employed during 2021, list the employer's name and how much you earned through the year. If you did not work, indicate N/A in the chart.

Employer's Name	2021 Earned Income
<i>Mack's Restaurant (example)</i>	<i>\$5,400</i>

2. Did you receive any other financial support for 2021? \_\_\_\_\_ Yes \_\_\_\_\_ No

a. If yes, list it here: \_\_\_\_\_  
\_\_\_\_\_

**D. Student's Financial Obligations**

1. Indicate below if you financially support anyone other than yourself (children, parents, dependents, etc.)

Full Name	Age	Relation to Student
<i>Jimmy Doe (example)</i>	<i>10</i>	<i>Brother</i>

**E. Briefly describe your financial need for this scholarship. You may also include any other circumstances related to your finances or any extenuating family circumstances that you would like to explain.**

**F. Certification and Signature**

I certify that all of the information reported on this form is complete and accurate.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date