

**SIGMUND FOUNDATION  
FINANCIAL INFORMATION SUMMARY**

2025-26

**To the applicant:** **Complete the top of this form, ONLY.** Do NOT fill out the financial information. Once you complete the upper portion of this form (Name, Address, Signature) , send it to the college or university you plan to attend. When it is returned to you, incorporate into your scholarship application packet.

Name of Student: \_\_\_\_\_

Student Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Signature: \_\_\_\_\_

**To the Financial Aid Office:** Please fill out the following information **and return the completed information to the requesting student.** Information for this coming academic year should reflect the aid package offered to the student.

Student Air Index (SAI) \$ \_\_\_\_\_

College Cost for this coming year \$ \_\_\_\_\_

**Gift Aid**

**Amount Offered**

College Gift Aid

    Grants \$ \_\_\_\_\_

    Scholarships \$ \_\_\_\_\_

Federal Grants/Pell & SEOG \$ \_\_\_\_\_

Michigan Competitive Scholarship or Grant \$ \_\_\_\_\_

Other Scholarships, Grants or Gifts \$ \_\_\_\_\_

**Self-help Aid**

**Amount Offered**

Federal Stafford Loan (subsidized only) \$ \_\_\_\_\_

Federal Perkins Loan \$ \_\_\_\_\_

Institutional Loan \$ \_\_\_\_\_

Federal Work-Study (FWS) \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Total Financial Aid Offered (for the upcoming  
academic year only) \$ \_\_\_\_\_

Unmet Need (for the upcoming academic  
year) - need minus aid \$ \_\_\_\_\_

Name of College/University: \_\_\_\_\_

Financial Aid Signature: \_\_\_\_\_