



International Transactional Analysis Association
1901 Olympic Blvd, Ste 200 ▪ Walnut Creek, CA 94596 ▪ USA
url: www.itaaworld.org E-mail: info@itaaworld.org

3. How will the grant be used? Identify the training program in which you will be participating. How did you decide on this program?

4. How do you imagine you will be different, personally and professionally, as a result of your participation in this program?

5. How do you currently participate in the ITAA or affiliate organization? How do you see yourself participating in the future as a result of acquiring advanced training?

Applicant's Signature: _____ **Date:** _____



FINANCIAL STATEMENT FORM

Name: _____
(First - Middle - Last)

Date of Birth: _____ Social Security #: _____
(Month - Day - Year) (US Applications Only)

Married: ___ Yes ___ No Children: ___ Yes ___ No Ages: _____

Occupation: _____

Employed by: _____

Spouse's Occupation / Employer: _____

Number of Dependents you count as Income Tax Exemptions:

APPLICANT'S ANNUAL INCOME & EXPENSES:	Year	Year	Year
	Prior to Application	Prior of Application	Following Application (Estimate)
A. Total Taxable Income	\$	\$	\$
B. Business Expenses	\$	\$	\$
C. Adjusted Taxable Income <i>(A minus B)</i>	\$	\$	\$
D. Nontaxable Income <i>(i.e. social security, veteran benefits, welfare, alimony, child support, etc.)</i>	\$	\$	\$
E. Spouse / Partner Income	\$	\$	\$
F. Total Income	\$	\$	\$
G. Living Expenses	\$	\$	\$
H. Income Tax <i>(Federal/State)</i>	\$	\$	\$
I. Emergency Expenses	\$	\$	\$



APPLICANT'S ASSETS AND LIABILITIES

Home (if owned):

Year Purchased	Purchase Price \$	Current Value &
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Other Real Estate:

Year Purchased	Purchase Price \$	Current Value \$
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Automobile: Year	Model	Current Value \$
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RESOURCES: 1. Savings \$ _____ 2. Other \$ _____
(*Endowments, Trusts, Grants, Scholarships, Investments, etc.*)

INDEBTEDNESS: Loan amount to be paid in year of application \$ _____
(*Mortgage, car loan, prior medical debts, school loans, etc.*)



I. COMPLETE IF APPLYING FOR TRAINING

Total Training Expenses

	Year 20 _____ <i>Prior to</i> <i>Application</i>	Year 20 _____ <i>Year of</i> <i>Application</i>	Year 20 _____ <i>Following</i> <i>Application</i>
A. TA Training Program	\$ _____	\$ _____	\$ _____
B. Special Workshop Tuition	\$ _____	\$ _____	\$ _____
C. Contract Filing Fees And Exam Fees	\$ _____	\$ _____	\$ _____
D. Books and Supplies	\$ _____	\$ _____	\$ _____

Specify TA workshop or training program you wish to attend: _____

Total Grant Request: \$ _____ (Maximum of \$1200 per year)

II. COMPLETE IF APPLYING FOR CONFERENCE FEE WAIVER

Specify conference you wish to attend: _____

Purpose for attending conference: _____

Registration Fee: \$ _____ TOTAL MONEY REQUESTED: \$ _____

III. COMPLETE IF APPLYING FOR ITAA DUES WAIVER

For which category of membership are you applying?

- Full Member Supporting Member Retired Member
 Student Member Honorary Member

TOTAL MONEY REQUESTED \$ _____
 (Partial Request: \$ _____ Full Dues Request: \$ _____)

APPLICANT CERTIFICATION

"I certify that all information I have provided in this application is true and correct as of the date set forth opposite my signature."

Applicant's Signature: _____ **Date:** _____



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SCHOLARSHIP GRANT FUND STATEMENT BY SUPERVISOR

To Be Completed by Supervisor and Forwarded to ITAA Separately

Supervisor's Name: _____

Telephone: _____ Fax: _____ Email: _____

Applicant's Name: _____

- 1. How long have you known the applicant?**
- 2. How long has the applicant been in training with you?**
- 3. Please comment on the applicant's strength and unique qualities**

- 4. Please assess the applicant's potential contribution to the ITAA**

- 5. Please rate applicant's degree of preparation for BOC exam.**

Low 1 —2—3—4—5—6—7—8—9—10 High

- 6. Please assess your level of endorsement for this grant.**

Supervisor's Signature: _____ **Date:** _____