

Bay Path College

09-10

APPLICATION FOR FINANCIAL AID

Please print or type clearly

_____ Check here if applying for **merit aid** only

Section I - Student's Personal Information

Name: _____

Address: _____ City/Town _____ State _____

Telephone: (____) _____ Date of Birth: _____ Zip Code _____

Work Telephone: (____) _____

Social Security #: _____ E-mail address: _____

Please list the amount of any other sources of aid you will be receiving. Include outside scholarships, veterans benefits, etc. _____

Are you eligible for tuition reimbursement from your employer? () Yes () No If, yes, list amount of reimbursement eligible to receive for the 2008-2009 academic year: _____

Section II – Educational Information

- () New Traditional Student () New Saturday Student () Returning Graduate Student
 () Returning Traditional Student () Returning Saturday Student () New Continuing Education Student
 () Certificate Student () New Graduate Student () Returning Continuing Education Student

Are you a transfer student for 2009 – 2010? () YES () NO

Section III- Household Information

FAMILY MEMBER INFORMATION – If you are an **INDEPENDENT** student, list yourself, your spouse (if applicable), and any other people for whom you will provide more than half their support between July 1, 2009 and June 30, 2010. If you are a **DEPENDENT** student, list yourself, your custodial parent(s), and any other people for whom your parent(s) will be providing more than half their support between July 1, 2009 and June 30, 2010.

If any of the people listed below will be attending college **at least half-time** between July 1, 2009 and June 30, 2010, and will be enrolled in a degree program, include the appropriate name of that college as well. If you need more space, list other family members in Section VI. (List all family members whether or not in college)

Full name of family member	Age	Relationship	Attend college at least one term full-time? half-time?	Name of university or college
1				
2				
3				
4				
5				
6				
7				

Section IV - Income & Expenses (All Lines Must Be Completed. If Answer Is Zero, Put In "0".)

	STUDENT (and spouse, if applicable)	PARENT
1. 2008 <u>untaxed</u> income and benefits (Give total amount for the year. Do not give monthly amounts.)		
a. Payments to tax-deferred pension and savings plans (amounts reported on the W-2 Form in Boxes 12a – 12d, codes D,E,F,G,H,S)	\$ _____	\$ _____
b. Worker’s Compensation	\$ _____	\$ _____
c. Child support received	\$ _____	\$ _____
d. Social Security benefits received	\$ _____	\$ _____
e. AFDC/ADC received	\$ _____	\$ _____
2. Child support paid by the parent(s) completing this form (or if INDEPENDENT, the amount paid by the student and/or spouse)	\$ _____	\$ _____
3. 2008 earnings from Federal Work-Study.	\$ _____	\$ _____

Section V – Assets (All Lines Must Be Completed. If Answer Is Zero, Put In "0".)

	STUDENT (and spouse, if applicable)	PARENT
1. As of today, the total current balance of cash, savings and checking accounts	\$ _____	\$ _____
2. As of today, the “net worth” (value less debt owed) of investments, including real estate (do not include primary residence)	\$ _____	\$ _____
3. As of today, the “net worth” of business and/or farm	\$ _____	\$ _____
4. Monthly home mortgage OR rental payment	\$ _____	\$ _____
	What is it worth today?	What is owed on it?
5. Home (renters write in “0”.)	\$ _____	\$ _____
Year purchased _____		
Purchase price \$ _____		

Section VI – Student and Parent Certification

I certify that I will use any money that I receive under the Title IV student financial aid programs solely for my educational expenses related to attendance at Bay Path College. I further certify that I am **not in default** on any educational loans and do not owe a refund to any institution on any federal assistance grants or loans. The student and parent certify that the information provided on this form is complete and accurate. We agree to provide any documentation required by the Financial Aid Office for verification of any of the above information.

1 _____ 2 _____
Student’s signature Student’s spouse’s signature (**Required if married**)

3 _____ 4 _____
Father’s (stepfather’s) signature Mother’s (stepmother’s) signature

Please Note: Parent signatures are required for dependent students.

Date Completed: _____