# Financial Aid Data Sheet 2012-2013

**Complete and Return to the Financial Aid Office**

## Instructions for Completing this Form

**READ THE QUESTION CAREFULLY. ANSWER ALL QUESTIONS COMPLETELY AND TRUTHFULLY.**

You may be required to provide documentation to support your answers. Indicate if the answer to a question is “no, not applicable, none, unknown, or zero”.

**DO NOT LEAVE ANY SPACE BLANK. YOUR FILE IS NOT COMPLETE IF THIS FORM HAS UNANSWERED QUESTIONS.**

### Section 1

**Please print legibly**

<table>
<thead>
<tr>
<th>NAME: ___________________________</th>
<th>Previous Last Name (s) ___________________________</th>
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<tbody>
<tr>
<td>LAST</td>
<td>FIRST</td>
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Social Security Number_________________________  Age_________  Birth date_________________________

**GENDER:☐ Male  ☐ Female**

e-mail address, if any_____________________________________________________

**MARITAL STATUS:** ☐ Single ☐ Separated ☐ Married ☐ Divorced ☐ Widowed

SID Number_____________________________________

Where will you live while attending college during 2012-2013? **CHECK ONE ONLY.**

☐ with parents  ☐ in public or Section 8 housing  ☐ free housing  ☐ I own my home  ☐ I rent by myself  ☐ I share a rental

What is your share of rent/mortgage? $____________ Average Share of Monthly Utilities (heat, water, electricity)? $____________

(Do not include amounts paid by other people in the household)

**Your address while attending college.** If you receive mail at a P.O. Box, you must list a street address as well as Box Number.

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>STREET</th>
<th>APT. NO.</th>
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<tbody>
<tr>
<td>CITY</td>
<td>STATE</td>
<td>ZIP</td>
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</table>

( ) TELEPHONE NUMBER

**PLEASE NOTIFY THE FINANCIAL AID OFFICE OF ANY CHANGES TO YOUR NAME, ADDRESS, AND TELEPHONE NUMBER!**

### Section 2

In what State do you hold residency? ____________________________________________

When was the last time you moved to and began living in Washington State? _______________(month/year)

Are you the spouse or dependent of an active-duty military person stationed in the State of Washington? ☐ Yes  ☐ No

Are you a Native American who is a resident of Oregon or Idaho, but qualifies for Washington resident tuition rates? ☐ Yes  ☐ No

If yes, list tribal affiliation______________________________________________________________________________
Section 3  ALL SECTIONS MUST BE FILLED OUT COMPLETELY

What year in college will you be?  □ First (0-45 credits)  □ Second or More (46 - 90 + credits)

What degree or certificate program are you pursuing at this school? CHECK ONE ONLY

□ Associate of Arts degree (Transfer to 4 year) (Specify area of study) ____________________________________________
□ Associate of Science degree (Transfer to 4 year) (Specify area of study) ____________________________________________
□ Associate of Applied Science degree (AAS) (List vocational program) ____________________________________________
□ Certificate (List certificate program) ____________________________________________

□ Bachelor of Applied Science in Applied Behavioral Science (Central Campus Only) ____________________________________________
□ Bachelor of Applied Science degree Hospitality Management (South Campus Only) ____________________________________________

Estimate when you will complete the program you selected above * REQUIRED INFORMATION*  Month/Year ____/____

Do you presently hold a college degree?  □ Yes  □ No  If yes, what type  □ Associate - 2 yr.  □ Bachelor - 4 yr.
Include degrees received outside the U.S.

Would you like to participate in the work-study program?  □ Yes  □ No  (student aid that you earn through work)

Academic Information

High School Graduate?  □ Yes  □ No  Mo./Yr. graduated ____/____  High School Name ____________________________________________

-OR-

GED Certificate?  □ Yes  □ No  Mo./Yr. received ____/____  City ________________________________ State __________

If no H.S. Diploma or GED, will you be in a High School Completion Program or Running Start during 2012-2013.  □ Yes  □ No

Student’s that participate in High School Completion, or Running Start Programs are not eligible for financial aid

Section 4

LIST all colleges or schools you have attended SINCE high school, including THIS college, and any college outside the U.S. Complete all requested information. If this section does not apply to you, check the following box:

□ I certify that I have never attended any college, university, trade, or technical school, including present or past attendance at this school.

<table>
<thead>
<tr>
<th>School</th>
<th>City, State</th>
<th>Previous Names You Have Used</th>
<th>Degree Received</th>
<th>Dates From</th>
<th>Dates To</th>
<th>No of Credits Earned</th>
<th>Did You Receive Aid</th>
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North requires unofficial grade transcripts from each college attended within the past 5 years.  These documents must be received before your file is “complete.”

South requires submission of an official transcript evaluation, for ALL previous colleges attended before your file is “complete.”
Section 5

Family Information for All Students

Do you have dependent children?  ☐ Yes  ☐ No  Ages___________________________________________________________

Do you have daycare expenses for the children listed above?  ☐ Yes  ☐ No  How much do you pay monthly? __________

Do you have adult daycare expenses for parents who live with you?  ☐ Yes  ☐ No  How much do you pay monthly? __________

Does an agency pay for all or part of your daycare?  ☐ Yes  ☐ No  How much each month? ________________

Married Students Only

Spouse’s Name: ______________________________________Social Security Number:______________________________

Date of Marriage:______________________ Will your spouse be a college student in 2012-2013?  ☐ Yes  ☐ No

If yes, at what college or institution? __________________________________________________________________________

Has your spouse applied for financial aid?  ☐ Yes  ☐ No

Section 6

Parent Information: All applicants must complete this section

If both parents are deceased, check here ☐ and complete the last question in this block. OTHERWISE complete entire block.

Provide parents’ name, address and telephone number. (if living outside the United States, list only name and country)

___________________________________________________    ____________________________________________________
MOTHERS NAME                                                                                                           FATHERS NAME
__________________________________________________________________     ___________________________________________________________________
ADDRESS                                                                                                                       ADDRESS
_________________________________________________________________      ________________________ _______________________________________ _____
CITY/STATE/ZIP                                                                                                              CITY/STATE/ZIP
(      )                                                                 _    (      )___________________________________
TELEPHONE                                                                                                                     TELEPHONE

List nearest relative or friend whom we could locate in case of an emergency:

_____________________________________     ______________________________________    (      )_______________
NAME                                                                                      ADDRESS                                                                            TELEPHONE

Section 7

Veteran Information:

Are you a veteran?  ☐ Yes  ☐ No

If yes, have you applied for Veterans Benefits?  (You may need to provide verification of such benefits).

☐ Yes  What Chapter? ________________________________________________________________Monthly Amount$__________

☐ No  Why not? __________________________________________________________________________
Section 8

Statement of Eligibility and Educational Purpose. All students must complete this statement. READ CAREFULLY!

I certify that I do not owe a refund on any grant or loan, am not in default on any loan or have made satisfactory arrangements to repay any defaulted loan, and have not borrowed in excess of the loan limits, under Title IV programs, from any institution.

I understand that I must be enrolled in an eligible degree or certificate program of study at this college which is at least two quarters in length. I understand I must make satisfactory academic progress (as defined by the financial aid office) toward completion of my college degree or vocational certificate in order to remain eligible for any aid which I might be awarded. Furthermore, I understand that if I withdraw from the college, that any tuition refund will be returned to the appropriate financial aid account(s). I may also owe a repayment of a portion of the aid received, and I agree to repay all funds owed. I also agree to notify the financial aid office before processing a withdrawal from the college.

I certify that I am not and will not receive financial aid concurrently at more than one college.

This institution reserves the right to withdraw, reduce, or modify my award due to funding limitations or due to changes in circumstances which may affect my eligibility.

I agree to notify the Financial Aid Office immediately of any change in my address or in my financial status:

If awarded a State Need Grant, I certify that I will comply with the following Conditions of Award:

1. I am a resident of the State of Washington, in accordance with RCW 28B.15.011-013.

2. I do not owe a refund or repayment on a State Need Grant, a Pell Grant, Academic Competitiveness Grant, SMART Grant or a Supplemental Education Opportunity Grant; nor am I in default on a loan made, insured, or guaranteed under the Federal Family Education Loan Program, the Federal Perkins Loan Program, or the Federal Direct Student Loan Program.

3. I am registered for at least three credits at this institution and am making satisfactory progress toward completion of my degree or certificate.

4. I understand that this grant is awarded to assist in meeting educational expenses and should I withdraw from classes, repayment of all or part of the grant may be required.

5. I understand that when I am able, I can voluntarily make financial contributions to the Higher Education Coordinating Board in recognition of the STATE NEED GRANT, and that these gifts will be used to provide financial assistance to other students.

6. I understand that the offer of a STATE NEED GRANT is subject to and conditioned upon the availability of funds. Furthermore, I agree that the Higher Education Coordinating Board and this institution reserve the right to withdraw, reduce, or modify the grant due to funding limitations or due to changes in circumstances which affect my eligibility for the STATE NEED GRANT.

7. I am not pursuing a degree in theology.

I certify that the information provided in this application and other financial aid documents represents full disclosure and is true and correct to the best of my knowledge. I understand that failure to fully disclose all requested information or reporting false information is grounds for denial of aid. I also understand the Financial Aid Office is required to report such actions to the appropriate law enforcement agencies for possible criminal prosecution.

I authorize the college to apply my financial aid toward my tuition and fees. This authorization is valid indefinitely unless rescinded in writing by me, which I understand may be done at any time.

I certify that I have received, read, understand, and take full responsibility for the financial aid consumer information provided by the college. I will use all Title IV, state and college money received only for expenses related to my study at:

Name of College: □ North □ Central □ SVI □ South

Student Signature ____________________________ Date ___________

Warning: Purposely giving false or misleading information is subject to a fine of up to $20,000, prison, or both.

Information in this publication is subject to change without notice. Please contact the Financial Aid Office if you have any questions.