

▶▶ **MUST BE ON FILE BEFORE ANY FINANCIAL AID WILL BE PROCESSED** ◀◀

2009/2010 Financial Aid Worksheet • Capital University CLL

A 2009/2010 Free Application for Federal Student Aid (FAFSA) is required for all federal/state grant and loan programs. The FAFSA may be completed online at www.fafsa.ed.gov. To aid you in filing your 2009/2010 FAFSA, the U.S. Dept. of Education has designed the 2009/2010 FAFSA on the Web Worksheet. This worksheet allows you to collect all of the necessary information on a paper form then transfer it electronically using the online version. These worksheets are available in the Columbus CLL center and in the Financial Aid Office. **The online version of the FAFSA is strongly encouraged.** Students who completed a FAFSA for 2008/2009 may submit a renewal FAFSA online. Capital's school code, 003023, must be included.

I completed and submitted a 2009/2010 FAFSA on _____ (insert date)

LAST NAME: _____ FIRST NAME: _____

MAILING ADDRESS: _____

SOCIAL SECURITY #: _____ - _____ - _____ E-MAIL: _____

HOME PHONE: (_____) _____ - _____ WORK PHONE: (_____) _____ - _____

Do you plan to receive Employer Reimbursement or a Tuition Waiver?

No Yes If yes, please indicate amount or percent expected _____

Do you plan to receive Veteran's Educational Benefits?

No Yes If yes, please indicate Chapter and amount _____

Have you received or do you plan to receive financial aid (Pell Grant and/or Stafford Loans) from an institution other than Capital University during the 2009/2010 academic year (including any summer term in 2009)?

No Yes If yes, please indicate the name of the other educational institution _____

Number of hours you plan to take per semester: **You must be enrolled at least 6 hrs. per semester to qualify for student loans**

Summer 2009 _____ Fall 2009 _____ Spring 2010 _____

Do you currently possess a Bachelor's Degree? No Yes **If yes, are you a teacher licensure candidate?** No Yes

When do you expect to complete your Bachelor's degree at Capital? _____

▶▶▶ STATEMENT OF FINANCIAL AID RESPONSIBILITY ◀◀◀

▶ I shall inform the Financial Aid Office of any other scholarship, employer reimbursement, grant or loan I may receive.

▶ I understand my total financial aid award and the amount of each type of aid (grants, loans, etc.) may change from year to year, and even from semester to semester, due to a change in my enrollment status.

▶ I understand if I withdraw from the university during the academic year, my financial aid eligibility will be re-calculated, and financial aid programs may be refunded according to federal and state regulations and university policy. *See Capital University Undergraduate Bulletin for details.*

▶ I certify by my signature that I have **read** the Capital University Financial Aid Worksheet and understand I must comply with the program guidelines indicated for each program and will notify the Financial Aid Office should any changes occur in my enrollment status as **originally** reported on this form or the Free Application for Federal Student Aid (FAFSA).

▶▶▶ Student's Signature _____ Date _____ ◀◀◀

RETURN THIS FORM TO CAPITAL UNIVERSITY FINANCIAL AID OFFICE
1 COLLEGE AND MAIN
COLUMBUS, OH 43209
614.236.6926 (FAX)

Any questions can be directed to Sam Selvage, Financial Aid Specialist, 614.236.6142, sselvage@capital.edu