

Application Status (check one)

- New Student
Do you expect to transfer credits? Yes No
- Returning
 Intra-University Transfer

Enrollment

Indicate the number of credits for which you plan to register in each of the following terms:

Fall 2008	0	1	2	3	4	5	6	7	8	9	10	11	12+*	*Enrollment over 11 credits requires academic approval.
Spring 2009	0	1	2	3	4	5	6	7	8	9	10	11	12+*	

Syracuse University I.D. number: _____ Social Security Number: _____

Full Legal Name: _____
Last First Middle Maiden

Permanent Address: _____
Number and Street City State Zip code

Area Code & Telephone: _____
Home Phone Number Work Phone Number Mobile Number

E-mail: _____
Personal School Work

Financial Aid Information

IMPORTANT NOTE: Less than half-time enrollment (less than 6 credits) is not eligible for federal loans, or to maintain prior loans in deferment status.

1. Stafford Loan

Please tell us how much Federal Stafford Loan money you would like to borrow: Your loan will be processed up to the Cost of Attendance minus other aid, or the amount you indicate here, whichever is lower.

- I would like to borrow Federal loans to cover my tuition only, or
 I would like to borrow Federal loans to cover my tuition, plus additional funds of \$ _____ (enter amount), or
 Maximum amounts allowed for Federal Subsidized & Unsubsidized loans

2. Federal Work-Study

Are you interested in being awarded Federal Work-Study? (See explanation in Step 6, Letter A of instructions) Yes No

3. Outside Awards

Do not include income earned from work, from Stafford loans, or institutional grants.

- Employer Tuition Benefit: \$ _____ / _____ Employer Fall Spring
 Outside Scholarship: \$ _____ / _____ Organization or Source Fall Spring
 Veteran's Educational: \$ _____ / _____ G.I. Bill, also called Montgomery Bill Fall Spring
 Other: \$ _____ / _____ Fall Spring

4. Verification

Household members	Date of Birth	Relationship	Member enrolled in College?	If yes, name of school
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

5. Unusual Circumstances (e.g., loss of employment; high medical expenses)

Attach a separate page and supporting documents to explain any unusual circumstances affecting your financial status.

Certification

By signing this application, you agree, if asked, to provide information that will verify the accuracy of your complete financial aid application. You also certify that you (1) will use federal, state, and institutional aid only to pay the cost of attending an institution of higher education; (2) are not in default on a federal student loan or have made satisfactory arrangements to repay it; (3) do not owe money back on a federal student grant or have made satisfactory arrangements to repay it; (4) will notify your school if you default on a student loan; (5) understand the Secretary of Education has the authority to verify income reported on this application with the Internal Revenue Service. If you purposely give false or misleading information, you may be fined \$10,000, sent to prison, or both. You will notify the University College Financial Aid Office of any change in your financial or academic status.

Student's signature _____

Today's date _____

Parent's (guardian's) signature Required of dependent students only _____

Today's date _____