



# Financial Aid Application: 2011-12

for Graduate and Professional Studies

## [SECTION 1: PERSONAL INFORMATION]

Name: \_\_\_\_\_  
LAST FIRST MIDDLE MAIDEN

Social Security No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
MONTH/DAY/YEAR

Permanent Address: \_\_\_\_\_  
STREET/BOX NUMBER CITY STATE ZIP

Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

Mobile Phone: ( ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Anticipated Date of Graduation: \_\_\_\_\_

## [SECTION 2: PROGRAM]

Indicate degree track, start date, and/or number of anticipated hours per term, as requested:

**B.S. (Business Administration Major)**     August 2010     February 2011     August 2011     February 2012

**B.S. (Early Childhood Education Major)**     January 2010     January 2011    |     licensure     non-licensure

**MSOT**     Year 1     Year 2     Year 3 (Clinicals)    Please indicate # of hours each semester this year: Summer \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_

**MBA**     September 2010     March 2011     September 2011     March 2012

**M.Ed.**     Summer - hours \_\_\_\_\_     Fall - hours \_\_\_\_\_     Spring - hours \_\_\_\_\_

## [SECTION 3: FAFSA]

I  **WILL**     **WILL NOT** file the FAFSA\*.    If YES, date FAFSA was/will be submitted \_\_\_\_\_     Please check if you mailed paper FAFSA

\*I understand that my FAFSA must be sent to the federal processor no later than FEBRUARY 1 if I wish to complete my financial aid file by the March 1 priority deadline (undergraduate Tennessee residents should submit the FAFSA as soon as possible after January 1, 2011, to be considered for the Tennessee Grant. TSAA awards are made until funds are depleted). The FAFSA should be completed based on accurate 2010 tax return data OR carefully constructed estimates. Estimated data will have to be corrected when tax returns are complete.

## [SECTION 4: NON-MILLIGAN ASSISTANCE]

If you receive scholarship(s) or grant(s) from outside sources, please list them, including the annual amount(s):

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(Please complete the back of this form)

**[SECTION 5: SPECIAL CIRCUMSTANCES – CONFIDENTIAL]**

If there are any special circumstances that may affect your ability to contribute toward the expenses of the 2011-2012 academic year, please describe below:

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**[SECTION 6: APPLICANT’S STATEMENT OF AGREEMENT AND UNDERSTANDING]**

Your signature indicates that you have read and understand the following:

1. I certify that all information on this form is true and complete to the best of my knowledge.
2. Financial aid is offered for one academic year only and disbursed on a term-by-term basis. I must re-apply to receive funds for future years.
3. If I reduce my course load to less than the number of hours on this application per term, it may affect my eligibility for financial aid.
4. If I obtain financial resources such as an inheritance, private grant, scholarship, etc., I must notify Student Financial Services. Failure to do so could jeopardize other aid I am receiving and future assistance.
5. I MUST make satisfactory progress, based on the Title IV Federal Satisfactory Academic Progress Policy (copy available in Student Financial Services Office), and/or satisfactory academic standard stated in the Catalog. Failure to do so could result in the loss of financial aid awards.
6. I agree that Student Financial Services may communicate financial aid awards and other related correspondence through my Milligan College e-mail account. It is my responsibility to regularly check this email account and be accountable for information communicated in this way.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please return this form to:***

**STUDENT FINANCIAL SERVICES  
P.O. BOX 250  
MILLIGAN COLLEGE, TN 37682**

**PHONE 423.461.8949 | 800.447.4880 | FAX 423.929.2368 | WWW.MILLIGAN.EDU/SFS**