



# Financial Aid/Scholarship Renewal Application: 2008-09

for traditional undergraduate students

## [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

School Year Residence:  On-Campus  With Relatives  Off-Campus (off-campus must be approved in advance by Student Development Office)

Home Phone: ( ) \_\_\_\_\_ Mobile Phone: ( ) \_\_\_\_\_

Major: \_\_\_\_\_ Date of Expected Graduation: \_\_\_\_\_

How many semester hours do you plan to enroll in for:  Summer \_\_\_\_\_  Fall \_\_\_\_\_  Spring \_\_\_\_\_

Class level during 2008-2009:  Freshman  Sophomore  Junior  Senior

## [SECTION 2: TYPE OF FINANCIAL AID]

I request renewal of my scholarship(s) as indicated below, pending completion of other scholarship requirements:

Academic Merit  Personnel Grant  Tuition Exchange  Athletic, indicate which sport(s) \_\_\_\_\_

I am requesting a work-study position:  No  Yes – I would like to work no more than:  5  7.5  10 hours/week

## [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 (Tennessee residents should submit the FAFSA no later than February 15 to be considered for the maximum Tennessee Grant). The FAFSA should be completed based on accurate 2007 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 2008-2009 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 12 semester hours per term, it may affect my eligibility for some financial aid programs.
4. If I change my living arrangements during the school year, I must contact Student Financial Services. (Changing your living arrangements may affect the amount of aid you are receiving.)
5. 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.
6. 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.
7. 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**