

2011-2012 FINANCIAL AID DATA FORM

SOUTHWESTERN INDIAN POLYTECHNIC INSTITUTE FINANCIAL AID OFFICE

PO BOX 10146 ALBUQUERQUE, NM 87184

505-346-2361, 2344 PHONE 505-346-2369 FAX

Email Address (REQUIRED): _____

We will send all financial aid information to your email address. It is your responsibility to check you email regularly.

Name: _____ SS# _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell: (____) _____

Date of Birth: ____/____/____ SIPI ID: _____

When you begin at SIPI, what will be your high school completion status?

GED

HS DIPLOMA

CURRENTLY ENROLLED IN GED PROGRAM

I plan to be:	I plan to attend:	While attending, I will:	Current class status:
<input type="checkbox"/> Full-time (12+ hours) <input type="checkbox"/> ¾ time (9-11) hours <input type="checkbox"/> ½ time (6-8) hours <input type="checkbox"/> Less than ½ time (1-5 hours)	<input type="checkbox"/> Academic Year (fall, spring, summer) <input type="checkbox"/> Fall 2011 <input type="checkbox"/> Spring 2012 <input type="checkbox"/> Summer 2012	<input type="checkbox"/> Reside with parents <input type="checkbox"/> Live on campus <input type="checkbox"/> Reside off campus-not with parents	<input type="checkbox"/> New Freshman <input type="checkbox"/> Continuing Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Transfer

College Major: _____ Anticipated Graduation Date: _____

Do you currently hold a Bachelor's Degree? _____ Yes _____ No

List all colleges/universities and the dates attended prior to SIPI:

*Send an academic transcript to our office from each listed school, even if you did not apply for aid there. No financial aid can be awarded until **ALL** transcripts are received and evaluated. Please complete a transfer form with your academic advisor, drop off a copy at the financial aid office, and submit to the Registrar's Office.*

Are you currently enrolled at another institution? _____ Yes _____ No

If so, are you receiving financial aid at this other institution? _____ Yes _____ No

Will you be receiving any outside scholarship/grants? _____ Yes _____ No

If so, list the amount and source of all outside scholarships/grants you may be receiving:

<p>RECERTIFICATION FOR QUESTION #23 OF FASFA FORM- DO NOT LEAVE BLANK</p> <p>YES or NO Never been convicted for possessing or selling illegal drugs while receiving Title IV funds.</p> <p>YES or NO Possession of Illegal Drugs, Sale of Illegal Drugs while receiving Title IV funds.</p> <p>YES or NO Two or more convictions possessing; One or more of selling Illegal Drugs while receiving Title IV funds.</p>

I certify that the information given is completed and accurate to the best of my knowledge. I understand that failure to provide complete and accurate information may be the basis for rejection of the application or loss of financial aid or scholarships.

Student's Signature

Date