**HIGHER EDUCATION COLLEGE ASSISTANCE PROGRAM STUDENT BUDGET-NEEDS WORKSHEET**

STUDENT’S NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SOCIAL SECURITY #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UNIVERSITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student marital status ( ) Married ( ) Single ( ) Divorced Student is ( ) Dependent ( ) Independent

I give permission for the University to release financial and academic information to the Wrangell Cooperative Association Higher Education Program

Student’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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September 2019 – June 2020

**College or University Budget Comments**

Tuition \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Student has not yet applied for financial aid. Need cannot be determined.

Fees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Student applied late. Will not be considered for funding.

Room \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Student’s application is incomplete and cannot be considered.

Board \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Funds exhausted at institution.

Books \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other (Specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Budget $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STUDENT RESOURCES AND INSTITUTION AWARDS**

Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

2020 2020 2021

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of AID:** | **FALL** | **SPRING** | **SUMMER** | **TOTAL** |
| AFDC or Welfare |  |  |  |  |
| Alaska Student Loan |  |  |  |  |
| College Scholarship |  |  |  |  |
| College Work Study Program |  |  |  |  |
| Perkins Loan |  |  |  |  |
| Pell Grant |  |  |  |  |
| SEOG |  |  |  |  |
| Spouse Contribution |  |  |  |  |
| Guaranteed Student Loan |  |  |  |  |
| Student’s Contribution |  |  |  |  |
| Tribal Assistance |  |  |  |  |
| Tuition Exemption |  |  |  |  |
| Veteran’s Benefits |  |  |  |  |
| Other (Specify) |  |  |  |  |
| Other |  |  |  |  |

Total Resources : $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unmet Need: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*\*\*** Financial Aid Officer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Quarter System: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semester System:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attention: FINANCIAL AID OFFICER: Make and retain a copy for your files.

Return to Wrangell Cooperative Association – Higher Education Program P.O. Box 2021 – Wrangell, Alaska 99929