

Potomac College
APPLICATION FOR FINANCIAL AID 2009-10

Legal Name _____ SSN _____ Date of Birth _____
 Last First MI Maiden

Start Date _____ Program _____ Check one: ___ High School Diploma ___ GED ___ Home schooled

POSTSECONDARY SCHOOL ATTENDANCE (list all):

| Name of School | Address | City, State, Zip | Dates attended | Degree obtained | Major (if applicable) |
|----------------|---------|------------------|----------------|-----------------|-----------------------|
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TUITION ASSISTANCE: Check all financial resources that apply to your attendance at Potomac College:

| Source | Name (if applicable) | Amount* | How paid* |
|-----------------------------|----------------------|---------|-----------|
| AmeriCorp | | | |
| Employer Reimbursement | | | |
| GSA Employer | | | |
| Employer Tuition Assistance | | | |
| Military Tuition Assistance | | | |
| Scholarship | | | |
| Sponsor | | | |
| Veterans Benefits (GI Bill) | | | |
| Vocational Rehabilitation | | | |
| SocSec Education Benefits | | | |
| Private Loan | | | |
| Other | | | |
| Other | | | |

*Indicate the amount of funds and how they are paid (i.e., monthly, by College billing, by reimbursement to you, lump sum, etc.)

CERTIFICATION:

I certify that the information given on this application is complete and correct to the best of my knowledge. I understand that withholding or misrepresenting information on this application makes me ineligible for admission to the College or subject to dismissal.

Signature _____ Date _____