

Potomac College
APPLICATION FOR FINANCIAL AID 2010-2011

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)

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 _____