



2006 - 2007 PLNU-SAN DIEGO APPLICATION FOR FINANCIAL ASSISTANCE FOR CREDENTIAL STUDENTS

PLEASE COMPLETE FORM IN **INK** AND **PRINT** LEGIBLY.

LAST NAME (LEGAL NAME)	FIRST NAME	MI
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STUDENT ID#	SOCIAL SECURITY NUMBER	E-MAIL ADDRESS	TELEPHONE NUMBER
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STUDENT PROGRAM: Teaching Credential

ACADEMIC PROGRAM 2006-2007: Major Course of Study _____

Anticipated date of completion or graduation for your current course of study at PLNU: Month Year

APPLYING FOR FINANCIAL AID FOR TWO CONSECUTIVE SEMESTERS:

If you are attending two consecutive semesters and would like to apply for financial aid for **BOTH** semesters, please check one:

- Fall 2006 - Spring 2007 Spring 2007 - Summer 2007 Summer 2007 - Fall 2007

APPLYING FOR FINANCIAL AID FOR ONLY ONE SEMESTER:

If you are attending one (or more) semester(s) and would like to apply for financial aid for **ONE** semester only, please check one:

- Fall 2006 only Spring 2007 only Summer 2007 only

Please check the dates you will be attending within the semester and indicate the number of units you are taking for each:

Fall 2006

Fall 2006 Semester Units:

Spring 2007

Spring 2007 Semester Units:

Summer 2007

Summer 2007 Semester Units:

Fall 2007

Fall 2007 Semester Units:

SUMMER DISBURSEMENT PERMIT (Applicable to students seeking aid for Summer 07 and Fall 07)

- I authorize PLNU to award half of my maximum loan eligibility for Summer 2007 in order to receive the remaining eligibility in an equal amount in Fall 2007.
- I authorize PLNU to award my full loan eligibility for Summer 2007 with the acknowledgement that I will receive less loan money in Fall 2007.

HOUSING STATUS FOR THE ACADEMIC YEAR (2006-2007)

- On-Campus With parent(s)/guardian(s)/relative(s) Off-Campus

PLEASE CHECK YES OR NO TO THE FOLLOWING QUESTION:

- Yes No Are you applying for institutional aid ONLY?
(check "Yes" if you **do not** want to be considered for federal and/or state aid and are not filing the FAFSA)

CAL GRANT (Teaching Credential students):

- Yes No Did you receive a Cal Grant A or B as an undergraduate student within the last 15 months?
If so, what was the total amount of your annual award? _____
If so, when did you receive your last Cal Grant (A or B) payment? _____

TUITION REMISSION (student, parent, or spouse employed by PLNU):

- Yes No Are you eligible to receive tuition remission benefits?

COMPANY REIMBURSEMENT:

- Yes No Are you eligible to receive company reimbursement from your employer?
If so, what is the total amount your employer will reimburse in a calendar year? _____

OTHER FINANCIAL ASSISTANCE:

- Yes No Will you be receiving additional assistance from an outside source (Outside scholarship(s), VA, Military Tuition Assistance, Vocational Rehabilitation, etc.)?
If so, please provide type of assistance and amount below:
Type: _____ Amount: _____ Type: _____ Amount: _____

CERTIFICATION STATEMENT:

I authorize, at the discretion of the PLNU Student Financial Services Office, the release of my transcripts and any other confidential materials to any organization for which I am being considered for a scholarship or other gift aid. I understand that any false statements or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

APPLICANT'S SIGNATURE _____ DATE _____

Return completed application to:
PLNU Mission Valley, 4007 Camino del Rio South, Suite 304, San Diego, CA 92108