

## Graduate Financial Aid Supplemental Form

The following information is required before the Financial Aid Office at Union Graduate College can process your student loan. The form will then be submitted to the Registrar's Office for completion of Section B.

### Section A: Student Completes

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

1. **Number of courses per term:** Su '08 \_\_\_\_\_ Fa '08 \_\_\_\_\_ Wi '09 \_\_\_\_\_ Sp '09 \_\_\_\_\_

2. **Number of internships per term:** Su '08 \_\_\_\_\_ Fa '08 \_\_\_\_\_ Wi '09 \_\_\_\_\_ Sp '09 \_\_\_\_\_

\*\*\*Please indicate number of courses in *only the terms in which you intend to borrow* loans for your balance.\*\*\*

3. **Total number of courses and registered internships Summer '08 through Spring '09** \_\_\_\_\_.

\*\*\*It is your responsibility to notify the Financial Aid Office if your planned number of courses/internships changes.\*\*\*

4. **Sources of aid per term** (list amount per term):

	Su '08	Fa '08	Wi '09	Sp '09
TAP/APTS	_____	_____	_____	_____
Tuition Waiver	_____	_____	_____	_____
Assistantship	_____	_____	_____	_____
Other Sources (Specify)	_____	_____	_____	_____

5. **Will your employer pay for any of your tuition costs?** \_\_\_\_ Yes \_\_\_\_ No

If yes, please indicate **amount per term** \$ \_\_\_\_\_ **Total for the academic year** \$ \_\_\_\_\_

6. **My planned housing status is:**(check one) \_\_\_\_ commuting from my parent's residence \_\_\_\_ commuting from my own residence

7. **Please list all previously attended colleges and dates enrolled at each college** \_\_\_\_\_

8. **Please indicate the amount and type(s) of Stafford loan you are applying for:** (max \$20,500 for 2008-2009 academic yr)

**Type(s) of loans** \_\_\_\_ subsidized (max \$8,500) \_\_\_\_ unsubsidized **Total amount requested** \_\_\_\_\_

I certify the above reported information to be true to the best of my knowledge as of this **date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

### Section B: Graduate Office Completes

Degree Program: \_\_\_\_\_ U or G

Matriculated as of: \_\_\_\_\_ FT or HT

Total # of courses completed/accepted: \_\_\_\_\_

Expected Mo./Yr. of completion: \_\_\_\_\_

UGC Signature: \_\_\_\_\_ Date: \_\_\_\_\_