



Springfield College

2010-11 Financial Aid Application

For Traditional Incoming Freshmen, Transfers & New Graduate Students

Office of Financial Aid
 263 Alden Street
 Springfield, MA 01109-3797
 Phone - 413.748.3108 or 413.748.3109
 Fax - 413.748.3462
 Email: finaid@spfldcol.edu
 Website: www.spfldcol.edu

Student's Personal Information

Name _____ Telephone (home) _____
Last First MI

Permanent Home Address _____
Street/PO Box # City/Town State Zip

SC ID# or Social Security Number _____ Local and/or Cell Phone# _____

Local Address _____
Street/PO Box # City/Town State Zip

Email Address _____ Date of Birth ____/____/____

2010-2011 Academic Year

Housing Status: (Circle One) Townhouse Senior Suites Living Center Residence Hall Grad Village

SC-owned Off Campus housing Private Off-campus Parent/relative

Date of First Enrollment at Springfield College _____ Expected Date of Graduation _____
(month/year) (month/year)

Expected Degree: (Circle One) Bachelor Masters Certificate Doctorate Major _____

Number of Credits you plan to take: Summer 2010 _____ Fall 2010 _____ Spring 2011 _____ Summer 2011 _____

Academic Level	Full-Time	3/4 Time	1/2 Time	<1/2 Time
Undergraduate	12 or more credits	9 — 11.5	6 — 8.5	< 6
Graduate	9 or more credits	7 — 8.5	5 — 6.5	< 5

Transfer & Graduate Student Information

Please indicate all previously attended institutions, dates of attendance, credits completed, degree(s) completed.

College/University	Dates of Attendance	Credits Completed	Degree Completed
_____	_____	_____	_____
_____	_____	_____	_____

Have you already received a Bachelor's Degree? (Circle One) YES NO
 How many credits do you expect to transfer to Springfield College? _____

Family Information/Household Verification – ALL STUDENTS MUST COMPLETE

For dependent students, list all the people that your parent(s) will support between July 1, 2010 and June 30, 2011.

- Include yourself, your parent(s), your parent(s)' other dependent children if they provide more than half of their support, and other people only if they receive more than half of their support from your parent(s).
- **Note: If your biological/adoptive parents are divorced/separated, you should be providing information on the parent with whom you live (custodial parent). If your custodial parent has remarried, we need your stepparent's information as well. In this situation, the proper marital status of your parent is "married".**

If by federal financial aid definition you are considered an independent student, please include yourself, your spouse if married at the time of filing your Free Application for Federal Student Aid (FAFSA), and any other family members (children, etc.) for whom you provide more than half of their support.

Provide the name of the college for family members who will be enrolled in a degree, diploma, or certificate program **AT LEAST HALF-TIME** during the 2010-2011 academic year. Please complete all areas. Remember, parents attending college are not counted in the total number of family members in college.

Full Name	Age	Relationship	Name of College 2010-2011	Enrollment Status (Full-Time, ¾ Time ½ Time, Less than ½)
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Example: DEPENDENT STUDENT

John Smith	45	Father		
Mary Smith	45	Mother		
James Smith	18	self	Springfield College	Full-Time
Linda Smith	20	sister	Boston University	3/4 time
Bob Smith	12	brother		

Example: INDEPENDENT STUDENT

Steve Jones	27	Self	Springfield College	Full-Time
Melissa Jones	26	Wife		
Todd Jones	4	Son		
Cheryl Jones	2	Daughter		

For Dependent Students - If your parents are divorced/separated, is there an agreement in the divorce/separation decree with regard to paying for college tuition? Please explain:

Per IRS regulations, you must file a federal tax return if:

Your filing status would be:	And your Gross Income was:
Single	More than \$9,350
Head of Household	More than \$12,000
Married, filing jointly	More than \$18,700
Married, filing separately	More than \$3,650
Qualifying widow(er) with dependent child	More than \$15,050

If you did not file and are not required to file a federal income tax return for 2009 per IRS regulations, (see chart above):

Please check here: _____ I am a student tax non-filer

_____ I am a parent tax non-filer

For tax non-filers only

What was the total amount of wages/earned income received in 2009? \$_____

Financial Information - (All Students and Parents should complete this section)

Use estimated information if necessary. Please answer all questions. Write "N/A" or "Zero" if a question does not apply.

PARENT(S) (FOR DEPENDENT STUDENT)	STUDENT/ SPOUSE	LIST TOTAL AMOUNTS RECEIVED IN 2009.
\$	\$	Combat pay or special combat pay. Only enter the amount that was taxable and included in your parents' (or your) adjusted gross income. Do not enter untaxed combat pay reported on the W-2 in Box 12, Code Q
\$	\$	Child support your parents' paid because of divorce or separation or as a result of a legal requirement. Do not include support for children in your parents' household
\$	\$	Child support received for all children. (Don't include foster care or adoption payments)
\$	\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of a basic military allowance for housing
\$	\$	Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational work-study allowances
\$	\$	Any other untaxed income or benefits not reported elsewhere such as workers' compensation, untaxed portions of railroad retirement benefits, disability, etc. benefits from flexible spending arrangements (e.g., cafeteria plans).

ASSETS

If your parent(s) own a home, please provide the following information: **(If you are an independent student, please complete this section if you own a home)**

Current Value of Home (primary residence): \$ _____ Total Home Debt: \$ _____

Year of Purchase: _____ Original Purchase Price: \$ _____

Certification Statement

I/We state the information provided on this form is complete and accurate to the best of our knowledge. I/We promise to notify the Office of Financial Aid of any material changes to the information on this application. I/We will also notify the Office of Financial Aid of any outside aid the student receives, if the student reduces or increases his/her course load from that originally stated, and if the student withdraws from the college. I/We understand that unsatisfactory academic progress or failure to fulfill these obligations may result in the termination of any aid awarded.

Student's Signature _____ Date _____

Student Spouse's Signature _____ Date _____

Parent's Signature _____ Date _____
(required for Dependent students)

Please attach a separate sheet explaining any special or unusual circumstances.

Return this completed application and any supporting documents to the Office of Financial Aid.

Applicant Type	Financial Aid Application Priority Completion Date	Date Award Letters will <u>begin</u> to be mailed for completed aid applications
Incoming Freshmen	March 15, 2010	March 25, 2010
Incoming Undergraduate Transfers	May 1, 2010	May 10, 2010
New Graduate Students	March 1, 2010	March 8, 2010