



2014-15 Supplemental Financial Aid Application, New Students

Instructions for Financial Aid Applicants

You must complete all required applications/forms to be considered for scholarship, fellowship, grant and/or loan assistance. **The deadlines listed are for priority consideration.** Applications received after these deadlines will be processed; however, scholarship and/or grant assistance may be limited for late applicants.

- **By March 1, 2014 (October 1, 2014 for online M.S. in Early Childhood Education or Bilingual/ESL Certificate)**
 1. Complete the Free Application for Federal Student Aid online at www.fafsa.ed.gov. If you do not have a Personal Identification Number (PIN) issued by the Department of Education, you can request one at www.pin.ed.gov.
 2. Complete this supplemental application and return it to:
 Financial Aid Office
 451 North LaSalle Street
 Chicago, Illinois 60654-4510

PERSONAL INFORMATION

Social Security number _____ / _____ / _____

Name _____
(Last) (First) (Middle) (Maiden/Birth name)

Current address _____
(Street)

(Street)

(City, State/Province) _____
(Zip/Country code)

(Country if not U.S.) Current until: _____
(MM/DD/YY)

Permanent address _____
(Street)

(Street)

(City, State/Province) _____
(Country, if not U.S.) _____
(Zip/Country code)

Telephone - Residence _____ Telephone – Mobile _____

E-mail address _____

FAMILY INFORMATION (do not leave blank)

List the people in your household, including: • Yourself • Your spouse • Your dependent children if you will provide more than half their support from July 1, 2014 through June 30, 2015 • Other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2014 through June 30, 2015. If any family members will attend college or work on a degree or certificate program on at least a half-time basis between July 1, 2014 and June 30, 2015, indicate the name of the college or university.

	Name and relationship to you	Age	College/University
You (the student)			Erikson Institute
Spouse			
Dependents (please include their relationship to you)			

ENROLLMENT INFORMATION

Do you plan to enroll in class(es) in **Summer 2014**? Yes No Undecided

*Note: The above question applies to **Summer 2014** only. Summer 2015 is considered part of the 2015-16 financial aid award year and therefore is not included in the awarding of financial aid for 2014-15.*

EMPLOYMENT INFORMATION

Current employer: _____ Title / Position _____

Are you currently employed: Full-time Part-time Not currently employed

Do you plan to work in 2014-15: Full-time Part-time Don't plan to work Don't Know

RESIDENCY AND RESOURCES

1. Please indicate your housing plans for 2014-15:

- With parents or in residence owned by parents;
- With relatives (other than parents/spouse/children) or in residence owned by relatives;
- Rent/own privately (but not with parents or relatives other than spouse/children)

2. Please list how much financial assistance for tuition, fees, books, transportation or child care you will receive for the upcoming academic year from the following sources:

Parents \$ _____ Employer Reimbursements \$ _____
 Other Relatives \$ _____ Other (please explain) \$ _____

Outside scholarships (not federal, state, or Erikson sources):

Source _____ \$ _____
 Source _____ \$ _____

3. Indicate your resources and liabilities below for 2014-15:

Resources and Liabilities	Student	Student's Spouse
Savings and Checking Accounts	\$	\$
Stocks and Bonds	\$	\$
Current Market Value of All Real Estate	\$	\$
Current Debt Owed for All Real Estate	\$	\$
Monthly Mortgage Payment on All Real Estate	\$	\$
Trust Funds	\$	\$
Private (non-federal) student loans	\$	\$

Acknowledgements

By signing this document, I acknowledge that I understand the following:

- If I receive Federal Title IV funds, Erikson Institute will credit those funds directly to my student tuition account and refund to me only the amount remaining after all outstanding tuition and fees have been paid;
- The Financial Aid Office may release personal information about me, including grades, required by external and internal scholarship donors; and
- I must reapply for financial aid each year and it is my responsibility to obtain the materials and adhere to the deadlines set by the Financial Aid Office.

I hereby certify that the information provided on this application is complete and accurate.

 Applicant signature Date

Erikson Institute does not discriminate against any individual on the basis of race, color, religion, national origin, sex, sexual orientation, gender identity, gender expression, marital status, age, disability, or veteran status in matters of admission, employment, or services or in the educational programs or activities it operates, in accordance with civil rights legislation and institutional commitment. Any alleged violations of this policy should be directed to the Senior Vice President for Academic Affairs/Dean of Faculty.