

2010-2011 FINANCIAL AID DATA FORM (July 1, 2010 to June 30, 2011)

DINÉ COLLEGE - Financial Aid & Scholarships Office

www.dinecollege.edu

Tsaile Campus: PO Box 97, Tsaile, Arizona 86556-0097 (928) 724-6731-6738-6739

Shiprock Campus: PO Box 580, Shiprock, NM 87420-0580 (505) 368-3511/3513

Campus/Site you will be attending:

- | | |
|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Chinle | <input type="checkbox"/> Crownpoint |
| <input type="checkbox"/> Ganado | <input type="checkbox"/> Kayenta |
| <input type="checkbox"/> Shiprock | <input type="checkbox"/> Tsaile |
| <input type="checkbox"/> Tuba City | <input type="checkbox"/> Window Rock |

Please check Terms Applying For:

- | | | | |
|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Fall 2010 | <input type="checkbox"/> Spring 2011 | <input type="checkbox"/> Summer 2011 | |
| <input type="checkbox"/> New Student | <input type="checkbox"/> Returning | <input type="checkbox"/> Transfer | <input type="checkbox"/> DC Graduate |

Student ID #

INSTRUCTIONS: To complete this form, please print clearly using a ball point pen. Diné College requires that all students complete the 2010-2011 FAFSA, to be considered for Pell Grant, other Federal, State and Tribal grants/Scholarships.

Section 1 - Personal Data

Last Name _____ First Name _____ Middle Initial _____ Maiden Name _____ Social Security Number _____

Mailing Address (PO Box, Street Address, etc) _____ City _____ State _____ Zip Code _____

Current Home Telephone Number _____ Cell Phone Number _____ Email Address _____

Date of Birth _____ Male Married Single, Widowed, Divorce
 Female Separated

Section 2 - Academic Information

High School Diploma or GED? _____ Date: _____ High School: _____

Type of Degree(s) you are currently seeking: _____ Proposed Major: _____
 Certificate (AS) Associate of Science
 (AA) Associate of Arts (AAS) Associate of Applied Science
 (BA) Bachelor of Arts in Elementary Education Program

Please check type of Degree(s) you ALREADY have received and/or earned
 None Certificate Associate's Bachelor's Master's Ph.D.

RETURNING STUDENTS: Have you ever received Financial Aid at Diné College? Yes No
Which semester and year did you last attend Diné College? _____

Name of Last College Attended _____ Attendance Dates (Month & Year) _____ Did you receive Financial Aid?
YES or NO

Name of Last College Attended _____ Attendance Dates (Month & Year) _____ Did you receive Financial Aid?
YES or NO

Section 3 - Family Information (all applicants must complete this section)

Student's # of Child(ren): _____ Ages: _____

Section 4 - Background Information

- N Y Are you a first generation student (the first person in your immediate family to pursue a college degree)?
 N Y Were you employed less than 20 hour per week in 2009 (excluding work study)?
 N Y Were you employed 20 or more hours/week in 2009 (excluding work study)?

Please read, sign, and date. By signing this form, I certify, that all information provided is accurate and I have not purposely given false or misleading information. I certify that I will use all Title IV, Tribal, State funds received only for expenses related to my studies at Dine College.

Student's Signature: _____
(REQUIRED)

Date: _____