



PARIS JUNIOR COLLEGE
FINANCIAL AID OFFICE

2400 Clarksville Street * Paris, Texas 75460 * (903)782-0429 Fax (903)782-0333

2009-2010 SUMMER FINANCIAL AID REQUEST FORM

Complete all of the requested information on this application. Please print clearly.

Name: _____ SSN/ID#: _____
Last First MI

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ E-Mail Address: _____

Please answer the following questions to determine your summer aid eligibility:

1. Have you attended another institution during the 2009-2010 school year? No (skip questions 2-4) Yes (see below)
2. If yes, please list the name of the institution(s) attended: _____
3. SUCCESSFULLY completed hours while you were at that institution? FALL: _____ hours SPRING: _____ hours
4. I am taking classes at PJC: Just for the summer semester. Transferring TO PJC from the institution I listed above.

Enter the TOTAL number of hours you will be attempting for each semester you expect to be enrolled. Enter "0" for the semester(s) you will not be attending.

May Mini-term (May 17- June 3, 2010): _____ Hours Summer I Regular (June 7 – July 8, 2010): _____ Hours

Summer II Regular (July 13 – August 12, 2010): _____ Hours Summer I Long (May 17 – August 12, 2010): _____ Hours

Summer I Extended (June 7 – August 12, 2010): _____ Hours

Select the type(s) of aid for which you would like to be considered:

Grants Only Loans (Half-time enrollment required) Work Study (Summer I Only)

Note: Federal guidelines prohibit students from receiving financial aid at two schools during the same semester.

I understand that this form will not be reviewed until Spring grades have posted.

Initials

Student Signature: _____

Date Signed: ____/____/____