MARYLHURST UNIVERSITY
FINANCIAL AID OFFICE
17600 Pacific Highway (Hwy 43)
PO Box 261 • Marylhurst, OR 97036-0261
503.699.6253 • 800.634.9982, ext. 6253
FAX: 503.635.6585
Email: finaid@marylhurst.edu
Web Site: www.marylhurst.edu

2009-2010 MARYLHURST UNIVERSITY FINANCIAL AID FORM

In addition to the Free Application for Federal Student Aid (FAFSA), you must also complete this form. Please read the instructions for each section carefully. Return this form to the Financial Aid Office. *(NOTE: You must be admitted to a degree program to be eligible for financial aid funding, except to complete prerequisite courses required for admission to a graduate program.)*

Name _____ **SSN** _____
Last First MI

Email_____ **Birthdate** _____

Address _____ **City, State, Zip**_____

Home Phone _____ **Cell Phone** _____

1. **In 2009/2010, I will be:**

   ❑ An Undergraduate Student

   ____Freshman (less than 45 credits) ____Sophomore (45 – 89.9 credits) ____Junior (90 – 134.9 credits) ____Senior (135+ credits) ____Taking prerequisite classes toward graduate admission

   ❑ A Graduate Student

   Anticipated Graduation Date:_____ / _____
   Month Year

2. **Specify the number of credits you plan to take each term of the 2009-2010 academic year:**
   You must be enrolled in at least half-time status each term to be eligible for financial aid. Half-time is defined as at least 6 credits for undergraduate students and at least 5 credits for graduate students.

FALL 2009	WINTER 2010	SPRING 2010	SUMMER 2010

3. **Tuition Benefit from an Outside Source:**
   If you will be receiving assistance with educational costs from an outside source, please list it below.

   Source: _____ **Amount of Benefit:** Tuition $ _____
   Fees $ _____
   Books/Supplies $ _____
   Other Amount $ _____

4. **Tuition Benefit from Marylhurst University:**
   Will you be receiving employee tuition benefits as an employee of Marylhurst? **YES**_____ **NO**_____
   - If **YES**, what is the amount of your benefit? $_____

5. **Certification:** By signing below, I certify all the information reported is complete and correct.

STUDENT SIGNATURE: _____ DATE: _____