2023-2024

AMERICAN ACADEMY OF ART COLLEGE FINANCIAL AID APPLICATION

1. Name:							
Last First Middle							
2. Birth Date: / 3. Social Security #:							
4. Street Address:							
5. City: State: Zip Code:							
6. Telephone: 7. E-Mail:							
8. Driver's License #: State:							
U.S. Citizen?							
0. U.S. Veteran? ☐ YES ☐ NO If YES, eligible for benefits? ☐ YES ☐ NO							
1. Types of financial aid you (your parents) are interested in? □ Grants □ Student Loans □ Parent Loan							
2. Start Date: 🗓 Summer 2023 🚨 Fall 2023 🚨 Spring 2024							
3. Expected enrollment: ☐ Full-time ☐ 3/4-time ☐ Half-time							
4. Where will you be living while in school? □ Parents □ Spouse □ Alone □ Roommate Mailing Address: (if different from above)							
Section B. Dependency Status							
5. Were you born before January 1, 2000? Yes No 18. Since you turned age 13, were you in foster care,	□ Yes □ No						
a ward of the court, or were both parents deceased? 6. Are you a veteran of the U.S. Armed Forces? □ Yes □ No 19. Are you or were you an emancipated minor or in a	☐ Yes ☐ No						
legal guardianship? 7. Are you married? 1 Yes 1 No 20. Do you have legal dependents (other than a spouse)?	□ Yes □ No						
you answered <u>NO</u> to ALL of the questions in Section B, you must provide parent information. Respond to questions 22 and 23 below. you answered <u>YES</u> to ANY of the questions in Section B, respond to questions 21 and 23 below.	- AMARIAN AMAR						
Section C. Household Information	\$ F						
21. Complete if you answered YES to any question in Section B. 22. Complete if you answered NO to all questions in Section B.	on B.						
	Parents' <u>current</u> marital status:						
L dingle L mained L division of Landing	□ Never Married □ Married or Remarried □ Divorced or Separated						
Date of marriage, divorce, separation, etc.:							
Date of marriage, divorce, separation, etc.:	Date of marriage, divorce, separation, etc.:						
State of legal residence: Date of residency: State of legal residence: Date of residency:							
	Number in parents' household in 2023-2024:						
23. List all members of your household according to your response in Section C. Also write the name of the college for any family member (e	excluding ificate program.						
parents) who will be attending college at least half-time between July 1, 2023 and June 30, 2024 and will be enrolled in a degree or certification.	e in 2023-24)						
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Se	ction D.		Special Circumst	ances						
25. Ar	e there any	, unt ncial	sual medical expenses no situation for 2023 or your	pay child care or elderly care for: ot paid by insurance: □ Yes □ N parent's financial situation for 203 ining the reason(s) why and provi	o 23 change s	significantly from	. 2021: □ Ye	s 🗆 No		
Se	ction E.		Other Information	7		·-···				
An	nerican Ac	aden	v of Art College?	attending another college, busing			al school bef	ore or during your a	ittendance at t	
			School	Address/Telephone Numb		Received Financial Ald?	Degree Granted?	Type of Degree	Dates	
						□ Yes □ No	□ Yes □ No			
:						□ Yes □ No	□ Yes			
						□ Yes □ No	□ Yes □ No			
Se	ction F.		Registration Cert	ification and Statement o	f Educat	ional Purpo	se			
author	the informized official aid ma	ial, I	agree to give proof of	y other person on this form is the information that I have giv	true and o en on this	complete to the form. I realize	e best of my that if I do	knowledge. If as not have proof w	sked by an hen asked,	
By sig	ning belo	w, 1	agree to the following r	egarding my financial aid:						
YES	NO □	the state of the s								
		2	I certify that the information contained herein is true and correct to the best of my (our) knowledge.							
	=	3	. I certify that I have received a school catalog and I have reviewed the section of Satisfactory Academic Progress, and I understand that if I fall below these levels, my financial aid funding will be terminated.							
0	0	4	. I understand that if I am on a payment plan, I must make my payment on or before the due date or risk being withdrawn from school.							
	<u> </u>	5	 I understand that if I discontinue my education a portion or the entire financial aid disbursed may need to be refunded, and I may owe this amount to the school. 							
	0	6	 I understand that all requested forms and documents as well as high school transcripts must be on file before I can receive financial aid funds. 							
	П	7	. I understand that fina the amount of aid for	ancial aid is not automatically in which I am eligible may chan	renewed. ige due to	I must apply b changes in Fe	efore the si deral rules	tart of each acade or my income situ	emic year and uation.	
						Date	e		_	
Stud	ent Signa	atur								
				· · · · · · · · · · · · · · · · · · ·		Date	e		_	
Pare	nt Signat	ure								

American Academy of Art College Student Statements and Certifications

EDUCATIONAL PURPOSE

I certify that I will use any money I receive under a federally assisted loan, grant, or work study program only for expenses related to my study at the American Academy of Art College.

I understand that I may accept all or part of any assistance offered to me. I must first use any assistance toward payment of tuition and fees before using the funds for other college related expenses.

I will promptly notify the Financial Services Office in writing of any changes in my financial circumstances, registration, or assistance received from sources outside the American Academy of Art College. These changes may result in a revision of my award without prior notice.

I understand that I am responsible for the repayment of my loans that I have used for my college tuition and college related expenses.

REFUNDS AND DEFAULT

I certify that I am not in default on any loan under the Federal Direct Loan Program, Subsidized or Unsubsidized, or the Federal Parent Loan for Undergraduate Students (PLUS) Program or the Federal Perkins Student Loan Program, and do not owe a refund on a grant received under the Federal PELL Grant or Federal Supplemental Educational Opportunity Grant (SEOG) Program for attendance at any institution.

RELEASE OF INFORMATION

I authorize the Financial Services Office to discuss my financial circumstances with other public or recognized private agencies which may also be considering me for aid. My financial aid status may also be discussed with my parents or other individuals who have provided information on my behalf. I also consent to release to the American Academy of Art College any information pertaining to previous financial aid from any source.

RENEWAL OF AWARDS

I understand that no financial aid is automatically renewed; I must apply each year.

Student Signature	Social Security Number	Date	

Notice: To receive Title IV financial aid, you must complete the Statement of Educational Purpose. If you purposely give false information on this form, you may be subject to fine or imprisonment or both.

Updated 09/2022