

INSTITUTIONAL FINANCIAL AID APPLICATION

2009-2010 Academic Year
Franklin Pierce University
College of Graduate and Professional Studies

APPLICATION INSTRUCTIONS

This application form is required for all Graduate and Professional Studies students seeking federal financial aid for period of enrollment between July 1, 2009 and June 30, 2010. Students are urged to submit their applications AS FAR IN ADVANCE of their intended starting date as possible. Students who plan to apply for Federal Aid must complete the Free Application for Federal Student Aid (FAFSA). A complete description of the application process and procedures, as well as selection criteria, is contained in the University's current catalog.

PLEASE TYPE OR PRINT:

Student Name: _____ SSN: _____

Address: _____
Street Address City State Zip

Date of Birth: _____ Home Telephone (____) _____

Employer: _____ Work Telephone (____) _____

Home Email address: _____ Work Email address _____

ENROLLMENT INFORMATION

When will/did you begin your education at Franklin Pierce University? _____

Estimated Degree Completion Date? (MO/YR) _____

Graduated High School on/after January 1, 2007? Yes No If yes, completed a *rigorous school program of study* Yes No

Degree Type (circle one): PARALEGAL CERT ASSOCIATES BACHELORS

MBA MS in ITM MEd MSN MPAS DPT DA

Grade Level (circle one): Freshman Sophomore Junior Senior 1st Yr Grad Continuing Grad

Center location (circle one): Concord Portsmouth Lebanon Rindge 100% On Line Goodyear, AZ

Please estimate to the best of your ability, as of today's date, the NUMBER of CREDITS you plan to pursue during each term.

UNDERGRADUATE (July 1, 2009 through June 30, 2010 only)

_____ Term 6 (June/Aug) _____ Term 1 (Sept/Oct) _____ Term 2 (Oct/Dec)

_____ Term 3 (Jan/Feb) _____ Term 4 (Mar/Apr) _____ Term 5 (Apr/June)

GRADUATE (July 1, 2009 through June 30, 2010 only)

_____ Term 4 (June - Aug) _____ Term 1 (Sept -Nov) _____ Term 2 (Nov -Feb) _____ Term 3 (Mar - May)

MEd students student teaching (indicate start/end dates and number of credits) _____

COLLEGE AND UNIVERSITY INFORMATION

If you are new to Franklin Pierce University and attended any other institution (college or university), please list below, even if you did not receive aid.

Name(s) of Institutions of Higher Education Attended	City	State	From (MM/YR)	To (MO/YR)	*Type of Degree	FA Received? Yes/No

*Diploma (D), Associates (A), Bachelors (B), Masters (M) Attach additional sheet if necessary

FINANCIAL INFORMATION

Please indicate below other benefits, which may be available to assist you with your educational expenses at Franklin Pierce University during 2009-2010.

VA Benefits \$ _____ Employer Reimbursement \$ _____ Voc. Rehab. \$ _____

FPU Family Discount \$ _____ Other Private Funds _____ \$ _____
(only list if you will be the student receiving discount) (Type) (Amount)

TITLE IV PAYMENT AUTHORIZATIONS

I understand that with this application I give authorization to Franklin Pierce University to apply my Title IV Federal Financial Aid proceeds to pay for all current charges billed to my student account. These may include, but are not limited to all applicable tuition, fees and book charges. If student loan funds I receive create a credit balance on my account, I give Franklin Pierce University permission to hold those funds during the loan period to pay for upcoming terms or semesters, unless I specifically request a refund of excess funds for other educational related expenses. I understand that if a credit balance should exist on my account at the end of the loan period, those funds will be returned to my lender, unless otherwise specified.

CERTIFICATION

If accepted for Admission to Franklin Pierce University, College of Graduate and Professional Studies, and if I decide to attend, I hereby acknowledge that I will be subject to the academic and social rules, regulations, and policies of the University, as well as local, state and federal laws. I certify that, as of the date I sign this statement, all the information supplied to the Student Financial Services office is correct and true to the best of my knowledge. I will contact Student Financial Services should any changes occur. I will use all Title IV money received only for expenses related to my study at FPU.

Student Signature: _____ Date: _____

<p>For center use only:</p> <p>I certify this student is matriculated into a degree program.</p> <p>Center Advisor Signature _____ Date: _____</p>
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