



Please complete this graduate application for financial aid and return to the financial aid office by fax or by mail. You will also be required to submit the FAFSA online in order to apply for student loans. Please see page 8 for details.

**I. Personal Information:** Are you a U.S. Citizen?  Yes  No If no, are you an eligible noncitizen?  Yes  No

Name: \_\_\_\_\_ Student ID #(If Known): \_\_\_\_\_

Address: \_\_\_\_\_

Preferred phone: (\_\_\_\_\_) \_\_\_\_\_ Preferred e-mail address: \_\_\_\_\_

Business phone: (\_\_\_\_\_) \_\_\_\_\_ Business address: \_\_\_\_\_

List relative if you give permission for this office to discuss your account:

Relative's Name: \_\_\_\_\_

**Total Household size** \_\_\_\_\_ **Total number of family members in college in 2011-2012** \_\_\_\_\_

**Please note:** You must be enrolled and successfully complete two consecutive sessions (6 credits) to be eligible to participate in the federal loan program. Your financial aid award is tentative until all credits are verified by Financial Aid and Cashier's office after the add/drop period in each session.

**If you are applying for the Multiple Intelligences Program and wish to borrow Summer II 2012 (6) credits in your financial aid package, indicate by checking this box:**

**Yes, I am enrolling in the Multiple Intelligences program and intend to use financial aid for Summer II.**

**If you plan to borrow in the student loan program, do you want to cover just billed charges or do you need to borrow to supplement personal and miscellaneous expenses? (Please choose only one option).**

Billed Charges Only

Maximum amount allowed

Billed Charges plus school expenses

Do not want to accept loans

Maximum amount per academic year at the graduate level is \$20,500, broken down into:  
 Subsidized: \$8500  
 Unsubsidized: \$12000  
 The amount listed above is subject to adjustment due to your total cost of attendance.

**II. Other funding sources: (Please list all that apply.)**

• Tuition Remission Amount \_\_\_\_\_

Name and Address of Employer: \_\_\_\_\_

• Outside Scholarships/Grants Amount \_\_\_\_\_

List all sources of outside scholarships: \_\_\_\_\_

• Outside Loans Source and Amount \_\_\_\_\_

**Special Circumstances:** Please explain any special circumstances regarding your financial status that you want considered as part of your financial aid application. All circumstances listed below must be documented to be considered as part of the application process. Please submit documentation with your application.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Spouse Signature (if applicable):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please mail or fax to the following address/number:**

Fax: 860-231-6702

Mail: Financial Aid - Saint Joseph College  
 1678 Asylum Avenue, West Hartford, CT 06117

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