MARIAN UNIVERSITY
Indianapolis

2010-11 Application for Financial Aid

Please complete form and return to: Office of Financial Aid
3200 Cold Spring Road
Indianapolis, IN 46222

317.955.6040 or 800.834.5494
Fax: 317.955.6424
Email: finaid@marian.edu

Student Name: _____
Last First MI Former (if applicable)

Social Security #: _____ Date of Birth: _____

Address Information (Mailing Address as of 1/1/10)

_____
Street

_____
City State Zip

_____
Home Phone Cell Phone

_____
E-mail Address

Will you live on campus? ☐Res Hall ☐Campus Apt/House

If not, with ☐Parents ☐Self/Others

Will you file the FAFSA? ☐Yes ☐No

Will you apply for a Stafford Student Loan? ☐Yes ☐No

Will your parent(s) apply for a parent loan? ☐Yes ☐No

Will you apply for a private loan? ☐Yes ☐No
(See http://www.marian.edu/financialaid/Pages/educationloans.aspx for details.)

Will you have a reduction in income in 2010? ☐Yes ☐No
(See below)

Have you attended any other institutions after high school? ☐Yes ☐No

If yes, list all institutions _____

Marian Academic Major: _____ Anticipated Marian Graduation Date: _____

Will you have a Bachelor's degree by July 1, 2010? ☐Yes ☐No

I am pursuing a(n): ☐Bachelor's Degree (4-year) ☐Associate's Degree (2-year) ☐Graduate Degree (Project Bridge)

Anticipated enrollment each semester? (Use: **F**=Full (12-20 hrs) **T**=3/4 (9-11 hrs) **H**=1/2 (6-8 hrs))

Summer I '10_____ Summer II '10_____ Fall '10_____ Spring '11_____

Please check any of the following which apply:

☐ I am a **Twenty-first Century Scholar**.
☐ I will participate in Intercollegiate Athletics in 2010-11. Sport:_____
☐ I have a brother or sister currently attending Marian University. Name:_____
☐ Parent has a Bachelor's degree from Marian University (College). Name:_____ Year:_____
☐ I have a Bachelor's degree from Marian University (College). Year:_____
☐ I am (or my spouse or parent is) an employee of Marian University. Position:_____
☐ I am (or my spouse or parent is) employed by a Catholic School or Agency.
Name, organization name and position:_____

EXPLANATION OF SPECIAL CIRCUMSTANCES *(if applicable)*

Use this space to explain any unusual expenses, i.e., total elementary, junior high, or senior high tuition paid in 2009; reduction in or loss of parental or student income due to divorce, separation, loss of employment or disability; total medical expenses not covered by insurance; or other special circumstances in 2010.

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To be eligible for Indiana State Grants, you MUST file your FAFSA by March 10th, 2010.