

Student Name: \_\_\_\_\_  
Last First MI Former (if applicable)

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone Numbers: \_\_\_\_\_  
Home Work Cell

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

Will you file the FAFSA?  Yes  No Do you plan to borrow Federal Student Loans?  Yes  No

Year in College (as of 7/1/11):  FR  FR+\*  SO  JR  SR \*FR+ = previously attended college

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

If yes, list all institutions \_\_\_\_\_

Will you have a Bachelor's degree by July 1, 2011?  Yes  No

I am pursuing a(n):  Bachelor's Degree (4-year) Anticipated Graduation Date: \_\_\_\_\_

Associate's Degree (2-year) Anticipated Graduation Date: \_\_\_\_\_

How many **credit hours** do you intend to take each term?

**Summer '11:** Term 7 \_\_\_\_\_ Term 8 \_\_\_\_\_ Term 9 \_\_\_\_\_

**Fall '11:** Term 1 \_\_\_\_\_ Term 2 \_\_\_\_\_ Term 3 \_\_\_\_\_

**Spring '12:** Term 4 \_\_\_\_\_ Term 5 \_\_\_\_\_ Term 6 \_\_\_\_\_

Your award package will be based upon this information!

Please check any of the following which apply:

I previously attended Marian University from \_\_\_\_\_ to \_\_\_\_\_

I am an employee of Marian University. Position: \_\_\_\_\_

My spouse is employed by Marian University. Position: \_\_\_\_\_

**EXPLANATION OF SPECIAL CIRCUMSTANCES (if applicable)**

Use this space to explain any unusual expenses, educational and other debts, year 2011 reduction in or loss of student income due to divorce, separation, loss of employment, disability or other special circumstances.

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To be eligible for full-time Indiana State Grants, you MUST file your 11-12 FAFSA by March 10<sup>th</sup>, 2011.