

# Webster University 2007-2008 Financial Aid Application

## Undergraduate

(Deadline for maximum consideration for aid is March 30, 2007)

Name \_\_\_\_\_ S.S.N. \_\_\_\_\_

Local Address \_\_\_\_\_

Local Phone # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_

Webster E-Mail \_\_\_\_\_ Other E-Mail \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

Address \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Employer \_\_\_\_\_ Work Phone # ( ) \_\_\_\_\_

Which Webster University campus will you be attending? \_\_\_\_\_

When was the last time you received financial aid from Webster? \_\_\_\_\_

Expected date of graduation from Webster? \_\_\_\_\_ Major \_\_\_\_\_

Where will you live during the 2007/2008 academic year?  W/parent  Off campus paying rent/mortgage  
 Dormitory  Webster Village Apartments

### Section A. Outside Assistance Expected

Will you be receiving assistance from any of the following? (Check all that apply and indicate amount.)

- Tuition reimbursement from employer \$\_\_\_\_\_ per (circle one): hour semester class
- Tuition remission from:  Webster  Other \$\_\_\_\_\_ per (circle one): hour semester class
- Vocational Rehabilitation \$\_\_\_\_\_ per (circle one): hour semester class
- Veteran's Benefits \$\_\_\_\_\_ per (circle one): hour semester class
- Other: Name of program: \_\_\_\_\_ \$\_\_\_\_\_ per (circle one): hour semester class

I will not be receiving any outside funding

**Please Note:** If you receive outside assistance anytime during the academic year, please send notification to the Financial Aid Office. Outside assistance may affect your financial aid award.

### Section B. Projected Enrollment

Write the number of credit hours you intend to enroll in each semester or eight-week term of the 2007-08 academic year.

Semester Credit Hours: Summer 2007 \_\_\_\_\_ Fall 2007 \_\_\_\_\_ Spring 2008 \_\_\_\_\_

OR

Term Credit Hours: Summer 2007 \_\_\_\_\_ Fall 1 2007 \_\_\_\_\_ Fall 2 2007 \_\_\_\_\_  
Spring 1 2008 \_\_\_\_\_ Spring 2 2008 \_\_\_\_\_

**Please Note:** Your financial eligibility is based in part on this projected enrollment. If you enroll differently than indicated here, your financial aid could be reduced or canceled.

**\*\*Please notify the Financial Aid Office in writing if your enrollment status changes.\*\***

**Section C.**

1. **During the 2007-08 Academic year will you be (circle one):** Freshman          Transfer          Returning Student

2. **Which degree will you be pursuing during the 2007-08 academic year (circle one):** First Bachelor Degree  
Second Bachelor Degree

**3. Financial Aid History**

Financial aid history is required from any College or University you attended after May 20, 2007. Even if no aid was received please list the school(s) and dates attended:

---

---

---

**Section D. Webster University Entrance Loan Counseling**

If you are a *first time loan borrower* at Webster University you must complete on-line entrance loan counseling at: <http://www.wachovia.com/education>. (Select the “entrance counseling” link)

**I acknowledge that I understand the following:**

- Grace periods
- Exit interview
- Repayment options and debt management strategies
- Obligation to notify lender of enrollment status or mailing address changes
- Average anticipated monthly payment
- Deferment

- Academic progress
- Default

**By my signature I affirm that I have been counseled regarding my rights and responsibilities under the student loan programs.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Section E. Release of Information Authorization**

In order to discuss student information with anyone other than the student (i.e. parents, spouse) we **MUST** have release of information authorization.

**I hereby give permission to Webster University to discuss my financial aid eligibility with:**

\_\_\_\_\_  
Name of Individual(s)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date

**Section F. Certification**

I certify that all information on this form is complete and accurate. I further understand that I am responsible for all necessary forms needed by the Financial Aid Office, and that my eligibility cannot be determined if information is missing from my file. *I further understand that it is my responsibility to notify the Financial Aid Office in writing of any enrollment changes.*

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date