Dependent

Student Status

New Continuing Re-Entry

East-West University 816 S Michigan Avenue | Chicago | IL 60605

College Level

Freshman Sophomore Junior Senior

Dependency

Dependent Independent



Last Name	First Name	me M. I. Date of		ate of Birth Phone Number		Social Security Number	
Address			Apt./Unit #	City	State	Zip Code	
E-mail 1			E-ma	il 2			
		FILL ONLY IF	YOU ARE A TRANSFE	R STUDENT			
Colleges attended:							
Are you transfering a Did you earn a degre College level attained	e? OBachel	or's OAssoci	ate's Other more Junior OS	enior			

OFFICE USE ONLY	NEST UNIT	NOTES
EFC	L'A P	
ISAC		
FPELL		
UPS	Excellence and Service	
VA	7980	

WARNING

Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to a fine of up to \$10,000 or imprisonment of up to five years or both under provisions of the U.S. Code.

East-West University

Statement of Educational Purpose and Certification for Applicants

l agree to:

- Verify any information I submit on any financial aid application if requested.
- Submit requested information to the Student Financial Aid Office in a timely fashion.
- \square Inform the Student Financial Aid Office immediately of any changes in the information I submitted.

I affirm to the best of my knowledge:

- I do not owe a repayment on any Federal Pell Grant or Supplemental Education Opportunity Grant received in previous years at any postsecondary institution.
- I am not in default on a National Direct Student Loan/Federal Perkins Loan or any Federal Stafford/ Guaranteed/Federal Insured Loan approved by a guarantee agency.

I understand that:

- I am not receiving financial aid from two schools at the same time.
- The Student Financial Aid Office has a responsibility to cancel all my financial aid if irregularities are verified.
- 🗌 I must make satisfactory academic progress as defined by East-West University to maintain eligibility for financial aid.
- I must be enrolled at least halftime to receive a Federal Direct loan.
- Applying for financial aid **will not defer University payment deadlines.**
- I must **reapply** for financial aid no later than **March 31** each year.
- \Box Financial aid funds that I am awarded will first be applied to current term charges owed to East-West University.

I declare under penalty of perjury that all information reported on this application is true and complete.

- \square I also affirm that the information on the Free Application for Federal Student Aid is complete and correct.
- I affirm that I will use any funds I receive under Federal Title IV programs (Federal Pell Grant, FSEOG, FWS, or Direct Loan) solely for tuition at East-West University during school year 20/. -201/.

I understand that I am responsible for repaying any funds I receive that I cannot reasonably be attributed to meeting my

- educational expenses at East-West University. I further understand that the amount of any repayment is based on regulations published by the U.S. Department of Education.
- I will come to the Student Financial Aid Office between February 15, 20/. and March 31, 20/., if I am interested in applying for the academic year 20/.-201/.
- I understand this application will be returned if it is not signed by the student and the parent, if applicable.

Enrollment specifications for Federal Direct and Parent Loan Programs:

- ALL Students (including those currently enrolled) are required to be enrolled Full-time at EWU. Financial aid will not cover audit classes. All hours must be for credit. The federal government determines Direct and Plus Loan eligibility based on academic limits or cost minus other aid, whichever is less.
- Undergraduate and post-graduate students are required to be enrolled Full-time in undergraduate credit hours. Per federal regulations, those students who will graduate at the end of one quarter must have their loans prorated per credits enrolled.
- First-time borrowers: Entrace Counseling is required.
- Before graduating: Exit Counseling is required.

I authorize East-West Unversity to retain any balance and apply it toward the next quarter's expenses.

l,

 \bigcirc Authorize \bigcirc Do not authorize

Print Student Name

Student Signature (required) Date

Parent Signature

Date

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WARNING



2010-2011 Verification Worksheet

Federal Student Aid Programs

FORM APPROVED OMB NO. 1845-0041

Dependent

Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your application with signed copies of your and your parent(s)' 2009 Federal tax forms, or with W-2 forms or other financial documents. The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, you or your school may need to make corrections electronically or by using your Student Aid Report (SAR).

Complete this verification form and submit it to your financial aid administrator as soon as possible, so that your financial aid won't be delayed. Your financial aid administrator will help you.

What you should do

- 1. Collect your and your parent(s)' financial documents (signed Federal income tax forms, W-2 forms, etc.).
- 2. Talk to your financial aid administrator if you have questions about completing this worksheet.
- 3. Complete and sign the worksheet—you and at least one parent.
- 4. Submit the completed worksheet, tax forms, and any other documents your school requests to your financial aid administrator.
- 5. Your financial aid administrator will compare information on this worksheet and any supporting documents with the information you submitted on your application. You or your school may need to make corrections electronically or by using your SAR.

A. Student Information

Last name	First name	M.I.	Social Security Number	
Address (include apt. no.)			Date of birth	
City	State	ZIP Code	Phone number (include area code)	

B. Family Information

List the people in your *parent(s)* '*household*, including:

- yourself and your parent(s) (including stepparent) even if you don't live with your parents, and
- your parents' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2010 through June 30, 2011, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2010 through June 30, 2011.

Write the names of all household members in the space(s) below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending at least half time between July 1, 2010 and June 30, 2011, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
Missy Jones (example)	18	Sister	Central University
		Self	

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0041. The time required to complete this information collection is estimated to average twelve minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: US Department of Education, Washington, DC 20202-5345.

C. Student's Tax Forms and Income Information (all applicants)

1. Check only one box below. Tax returns include the 2009 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return. If you did not keep a copy of your tax return, request a copy from your tax preparer or request an Internal Revenue Service form that lists tax account information.

Check here if you are attaching a signed copy of your tax return.

Check here if a signed tax return will be submitted to the school by _____(date).

] Check here if you will not file and are not required to file a 2009 U.S. Income Tax Return.

2. Funds received for child support and other untaxed income. (See Question 45 of the Free Application for Federal Student Aid (FAFSA).)

Sources of Untaxed Income	2009 Amount	Sources of Untaxed Income	2009 Amount
a. Child Support	\$	d.	\$
b. Workman's Compensation	\$	e.	\$
c. Untaxed Pensions	\$	f.	\$

3. If you did not file and are not required to file a 2009 Federal income tax return, list below your employer(s) and any income received in 2009 (use the W-2 form or other earnings statements if available).

Sources	2009 Income
	\$
	\$
	\$

D. Parent(s)' Tax Forms and Income Information

1. Check only one box below. Tax returns include the 2009 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return. If your parent(s) did not keep a copy of their tax return, request a copy from the tax preparer or request an Internal Revenue Service form that lists tax account information.

Check here if you are attaching a signed copy of your parents' tax return(s).

Check here if a signed tax return(s) will be submitted to the school by _____

Check here if your parent(s) will not file and are not required to file a 2009 U.S. Income Tax Return.

2. Funds received for child support and other untaxed income. (See Question 93 of the FAFSA.)

Sources of Untaxed Income	2009 Amount	Sources of Untaxed Income	2009 Amount
a. Child Support	\$	d.	\$
b. Workman's Compensation	\$	е.	\$
c. Untaxed Pensions	\$	f.	\$

3. If your parent(s) did not file and are not required to file a 2009 Federal income tax return, list below your parent(s)' employer(s) and any income they received in 2009 (use the W-2 form or other earnings statements if available).

Sources	2009 Income
	\$
	\$
	\$

E. Sign this Worksheet

Each person signing this form certifies that all the information reported on it is complete and correct. The student and at least one parent must sign and date.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

(date).

Student

Date

Date

Do not mail this worksheet to the Department of Education. Submit this worksheet to your Financial Aid Administrator at your school. Don't forget to sign your tax forms.

Parent





Last Name	First Name	M. I.	Driver License State	e and Number	Social Security Number
Address			Apt./Unit #	City	State Zip Code
Date of Birth	FIN		CIA		
	FXIT COUN	SFLING	CIIINF FA	R RARRAV	VFRS

Instructions: Please read the Rights and Responsibilities Summary Checklist on the **NEXT** page.

Name

I have attended exit counseling for subsidized Federal Direct Stafford/Ford Loan and Federal Direct Unsubsidized Stafford/Ford loan borrowers. I have read, and I understand, my rights and responsibilities as a borrower, as listed on the back of this page. I also understand that I must repay my loan according to the terms of the promissory note.

Employer after leaving school (if known):

Reference: You must list two persons, with different U.S. address, who will know your whereabouts for at least three years:

Any person who knowir	ndly makes a f		or misrepresentation on this	form shall be subject to a
Student Signature	Date	WAR	NING	
				Relationship
				Phone#
				City, State, Zip
				Address
				Name
				Relationship
,				Phone#
		Phone#		City, State, Zip
		City, State, Zip		Address
		Address		Name
1			least three years.	

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East-West University Rights and Responsibilities Summary Checklist

I understand that I have a right to the following (check off each box as you read)

- \Box Written information on my loan obligations and information on my rights and responsibilities as a borrower
- A grace period and an explanation of what this means
 A disclosure statement, received before I begin to repay my loan, that includes information about interest rates, fees, the balance
 I owe, and the number of payments
- Deferment of repayment for certain defined periods, if I qualify and if I request it
- Forbearance, if I qualify and if I request it
- Prepayment of my loan in whole or in part any time without an early-repayment penalty
- A copy of my promissory note either before or at the time my loan is disbursed
- Documentation that my loan(s) are paid in full

I understand that I'm responsible for:

- Attending exit counseling before I leave school or drop below half-time enrollment.
- $_{ o}$ Repaying my loan even if I do not complete my academic program (under certain circumstances), I am dissatisfied with the education I received, or I am unable to find employment after I graduate.
- $_{ o}$ Notifying the U.S. Department of Education's Direct Loan Servicing Center of anything that might alter my eligibility for an existing deferment
- Making monthly payments on my loan(s) after I leave school, unless I have a deferment or a forbearance

I'm responsible for notifying my school and the District Loan Servicing Center if:

- Move/change my address
- Change my name
- Withdraw from school or drop below half-time enrollment

Date

- Fail to enroll or reenroll in school for the period for which the loan was intended
- Transfer to another school
- Change my expected date of graduation
- Graduate

I have received exit counseling materials for Direct Subsidized Loan and Direct Unsubsidized Loan borrowers. I have read and understand my rights and responsibilities as a borrower.

I understand that I have received a Loan(s) from the federal government that must be repaid.

Student Signature (required)

WARNING

Student Name and Social Security Number

Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to a fine of up to \$10,000 or imprisonment of up to five years or both under provisions of the U.S. Code.