



FINANCIAL AID DATA SHEET 2009-2010

INSTRUCTIONS: Read and answer all questions. It is your responsibility to answer all questions to the best of your ability. You may be required to provide documentation. CAREFULLY READ THE BACK PAGE BEFORE SIGNING. Once complete return this form to the Financial Aid Office.

APPLICANT INFORMATION (please print)

Name (Last, First, Middle) _____ PREVIOUS LAST NAME (S) _____

Social Security Number _____ Age _____ Date of Birth _____

SEX: Male Female MARITAL STATUS: Single Married Separated Divorced Widowed

WHERE WILL YOU LIVE WHILE ATTENDING COLLEGE IN 2009-2010?

Parent's residence Rent Own Home Other: _____

What is your monthly rent or mortgage payment \$ _____ If zero, please explain: _____

ADDRESS WHILE ATTENDING THIS COLLEGE:

_____	_____	_____	_____
NUMBER	STREET	APT NUMBER	(_____) _____
_____	_____	_____	TELEPHONE
CITY	STATE	ZIP CODE	

RESIDENCY AND ETHNIC INFORMATION

(To become a resident of Washington State, state law requires that you establish your permanent domicile in the state and that you have lived in the State of Washington for the past 12 months)

Of what state are you a legal resident? _____ How long have you resided in Washington? _____

Of what state are your parents a legal resident? _____ How long have they resided in Washington? _____

Check as applies to you:

Asian (1) Black (2) American Indian (3) Hispanic (4) White (6) Other (0)

ACADEMIC INFORMATION

High School Graduate? Yes Year _____ No

Do you have your GED? Yes Year _____ No

Do you presently hold a degree? Yes No

Associate Year/Institution _____

Bachelor's/Higher Year/Institution _____

EDUCATIONAL PLAN

Name of RTC's Degree/Certificate Program: _____

Currently Attending – Start Date _____

Admitted – Planned Start Date _____

Not Admitted

Have you taken the ASSET/COMPASS test? Yes No When? _____ Where? _____

List all educational institutions, including RTC, you have attended after high school (including present school). If you have never attended an educational institution, write NONE. If more space is required, attach another sheet.

School	State	Degree/Cert.	Month/Year	Did you receive aid?

VETERAN INFORMATION

Are you a veteran? Yes No Will you be receiving VA benefits while attending school? Yes No

If yes, type of benefit _____ Chapter No. _____

Amount per month \$ _____ Number of Months _____

STUDENTS WITH DEPENDENT CHILDREN (under age of 12)

Will daycare be required? Yes No If Yes, Will daycare be funded by an agency? Yes No

Provider Name _____ Provider Phone # _____

If you will pay all or part of daycare, how much do you expect to pay per month \$ _____

EMPLOYMENT INFORMATION

STUDENT

Are you currently employed? Yes No

Employer _____ Monthly \$ _____

SPOUSE

Is spouse currently employed? Yes No

Employer _____ Monthly \$ _____

OUTSIDE RESOURCES AVAILABLE DURING YOUR ENROLLMENT

Do you or will you receive any other resources (including tuition and books) during the 2009-2010 school year? Yes No

Alimony/ Child Support \$ _____

Labor and Industries / Workman's Comp. \$ _____

Unemployment Benefits \$ _____

WorkSource (TAA, WIA, etc) \$ _____

Scholarship \$ _____

Other (specify) _____ \$ _____

Public Asst. (AFDC/GAU/TANF) \$ _____

Social Security / SSI \$ _____

DVR (Dept. of Voc Rehab) \$ _____

Tribe / Agency \$ _____

If you have no resources/income, how are you meeting your living exp. _____

HOUSEHOLD INFORMATION

List yourself first (Include all members of your household that you or your parent will provide more than half of their support and will continue to do so from July 1, 2009, through June 30, 2010. Include the name of the college any family member listed on this form are or will be enrolled at least half time during the award year in a degree or certificate program.)

Full Name	Age	Relationship	College attending during 2009-2010

CONDITIONS OF YOUR FINANCIAL AID AWARD

To receive the financial aid offered during the academic year, you must agree to and continue to meet the following conditions:

1. You must maintain satisfactory progress and attendance as defined for financial aid recipients, in order to remain eligible.
2. You authorize Renton Technical College to use the proceeds from your Pell Grant/State Need Grant/SEOG to pay tuition required for your training program.
3. As a financial aid recipient, you are subject to the financial aid refund and repayment policies and must inform the FAO if you withdraw.
4. You must report any changes which affect your financial resources as they occur. This includes changes in your and/or your parents' income, marital status, scholarships, grants, loans, gifts and employment.
5. All financial aid awards are subject to the availability of funds. If offered aid, it will depend on federal and state allocations to the college and may be adjusted if allocations are not sufficient.
6. State Need Grant program – If you are a Washington resident and eligible for a State Need Grant, your signature below certifies that you are a resident of Washington and that you are not pursuing a degree in theology. Also, when you are able, you may make voluntary contributions to the Higher Education Coordinating Board in recognition of our State Need Grant. These gifts will provide financial aid to other students. Further, you understand that the Higher Education Coordinating Board and this college reserve the right to withdraw, reduce, or modify the grant due to funding limitation or due to changes in circumstances that would affect your eligibility.
7. In addition, you certify you do not owe a refund or repayment on a State Need Grant, a Pell Grant or a SEOG, or that you are not in default on a loan insured or guaranteed under the Perkins, National Direct or FFELP programs.

REQUIRED SIGNATURES:

I have read and understand the conditions of receiving financial aid. I hereby declare under penalty of perjury that the foregoing is true and correct

Signature

Date

I authorize Renton Technical College to release financial aid information to the agency or agencies listed below:

Agency Name

Student Signature