



2008-2009 Application for Financial Aid

Mailing Address: Financial Aid Office, Davis Applied Technology College, 550 E. 300 S. Kaysville, UT 84037-2699
 Phone (801) 593-2516 Fax (801) 593-7916
 Please complete all information in ink. PRINT clearly!!

A. STUDENT INFORMATION:

Name _____ Social Security Number _____ Phone Number _____

Street _____ City _____ State _____ Zip _____ E-mail (optional) _____

B. SUBMIT THE FOLLOWING DOCUMENTS TO THE FINANCIAL AID OFFICE:

1. Completed and signed "Application for Financial Aid" (this Form).
2. A copy of your High School Diploma, or GED.
3. Upon Request:
 - Student's 2007 return if filed and W-2's.
 - Spouse's 2007 return if filed, and W-2's even if you were not married in 2007.
 - Parent's return and W-2's if you could not answer Yes to any question in Step 3 on the FAFSA.
 - Non-filers, please provide copies of your W-2 forms and verification of any untaxed income.
 - A copy of your marriage license (or certificate) if you are under 24 years of age and have applied as married and have no dependents.
 - Legal separation or divorce documents if you applied as "separated" or "divorced" or you applied with your parents as "separated" or "divorced".
 - If you are unmarried, under 24 years of age, and applied as a veteran, submit a copy of your DD214.

Note: Certain circumstances may require additional documentation, such as: name change, social security number conflict, selective service registration, citizenship verification, orphan or ward of the court, etc.

C. PERSONAL REFERENCES:

EMERGENCY CONTACT

Name _____ Address _____ Relationship _____

City _____ State _____ Zip _____ Phone # _____

D. HIGHER EDUCATION: List all schools you have enrolled in since high school.

NAME OF SCHOOL	CITY & STATE	FIRST & LAST DATES OF ENROLLMENT
_____	_____	_____
_____	_____	_____

E. PLEASE ANSWER ALL QUESTIONS.

1. Do you have a high school diploma or GED? (Please provide this office with a copy) No Yes
2. Have you attended the DATC before?..... No Yes
3. What program are you enrolling in? _____
4. What is your **anticipated** completion date from **DATC**? _____
5. Which of the following best describes your living situation while attending DATC? Living with Parent/s Buying a home
 Renting Job Corp resident Living with others who provide me with room and board
6. In **addition** to the Pell Grant, would you also like to apply for: Work-Study Other Grants (SEOG, LEAP)

F. WHAT IS YOUR PLANNED ENROLLMENT STATUS FOR 2008-2009?

- FT 24-30 hrs p/w
 3/4T 18-23 hrs p/w
 1/2T 12-17 hrs p/w
 LTH 1-11 hrs p/w

G. OTHER ASSISTANCE THAT YOU WILL RECEIVE IN THE 2008-2009 ACADEMIC YEAR (Fill in "\$0" if not applicable.)

- | | |
|--|---|
| <p>1. Vocational Rehab-applied for..... <input type="checkbox"/> No <input type="checkbox"/> Yes
 \$ _____ \$ _____ \$ _____
 Tuition/fees per mo. Books per mo. Living Expenses</p> <p>2. Workforce Services-applied for..... <input type="checkbox"/> No <input type="checkbox"/> Yes
 \$ _____ \$ _____ \$ _____
 Tuition/fees per mo. Books per mo. Living Expenses</p> <p>3. Scholarships:
 a. DATC Scholarship <input type="checkbox"/> No <input type="checkbox"/> Yes
 \$ _____
 Award Amount
 b. Any other source..... <input type="checkbox"/> No <input type="checkbox"/> Yes
 \$ _____ \$ _____ \$ _____
 Tuition/fees per mo. Books per mo. Living Expenses
 What Source? _____</p> <p>4. Employer Tuition Assistance..... <input type="checkbox"/> No <input type="checkbox"/> Yes
 \$ _____ \$ _____
 Tuition/fees per mo. Books per mo.
 Company name: _____</p> | <p>5. Veteran's Benefits..... <input type="checkbox"/> No <input type="checkbox"/> Yes
 (Check all that apply)</p> <p><input type="checkbox"/> Montgomery GI Bill (ch.30)..... \$ _____
 Monthly Amount</p> <p><input type="checkbox"/> Vietnam ERA GI Bill (ch.34/40)..... \$ _____
 Monthly Amount</p> <p><input type="checkbox"/> Voc. Rehab (ch.31).....
 \$ _____ \$ _____ \$ _____
 Tuition/Fees Books per mo. Monthly Amount</p> <p><input type="checkbox"/> Utah National Guard Tuition Asst..... \$ _____
 Monthly Amount</p> <p><input type="checkbox"/> Active Duty Military Tuition Asst.....
 \$ _____ \$ _____ \$ _____
 Tuition/Fees Books per mo. Monthly Amount</p> <p><input type="checkbox"/> Other (describe): _____
 \$ _____
 Monthly Amount</p> |
|--|---|

H. AUTHORIZATION AND SATISFACTORY PROGRESS AGREEMENT

I affirm that, to the best of my knowledge:

1. I do not owe an overpayment on a Title IV Federal Grant, including Pell, SEOG, LEAP, HEA Grant, or any other Student Aid Program grant at any institution.
2. I am not in default on a Title IV Federal Loan, including GSL, SLS, Plus, Federally Insured Student Loan (FFEL, NDSL, or Perkins Loan), at any institution.
3. I am also aware that in order to continue to receive assistance from any Title IV program, I must maintain satisfactory progress and attendance in the course of study I am pursuing according to the DATC financial aid satisfactory progress policy. I authorize the release and exchange of information between the DATC and any agency providing me with financial assistance. I also understand that I must report any changes in information listed on this form. I hereby certify that all the information set forth by me on this application is correct to the best of my knowledge and agree that any or all information may be verified by the DATC. I understand that falsification is cause for appropriate legal and/or disciplinary action.

The student must sign this form! If the student is Dependent, a parent must also sign!

Independent Student Certification and Signature

By signing this form, I certify that all the information reported to qualify for federal student aid is complete and correct. If the information is not accurate, I authorize the Financial Aid Office to make the correction.

X _____
 Student Signature Date

Dependent Student and Parent Certification and Signatures

By signing this form, I (we) certify that all the information reported to qualify for federal student aid is complete and correct. If the information is not accurate, I authorize the Financial Aid Office to make the correction.

X _____
 Student Signature Date

X _____
 Parent Signature Date