

## **Athletic Financial Aid Request Form**

Student Name:						Sport				
C# or Eligibility Center ID:		Date of Birth:			Interr	national: Y	es	No		
Street Address:						City: _				
State:						Count	:ry:			
Year in School: (select one)		Current St	tudent-	Athlete						
· ,			r College Transfer (1 <sup>st</sup> Year)				2 Year College Transfer (Graduate)			
4 Year College Transfer 4			4 Year College Transfer (Graduate)				5 <sup>th</sup> Year / Former Student-Athlete			
Single Year Award Multi	Year Award – Nui	mber of Ye	ars:	NLI Needed:	Yes	No	Official Visit	: Yes	s No	
Award Breakdown:										
Year 1 – Academic Year:	mic Year: Year 3 – Academic Year			ic Year:		Year 4 – Acade	mic Yea	r:		
Percentage or Dollar Amount:	Dollar Amo	unt:	Percentage or Dollar Amo		unt:	unt: Percentage or Dollar Amount:		nount:		
Percentage:%	Percentage:		%	Percentage:		_%	Percentage:		%	
Include books: Yes No	Include books:	Yes	No	Include books:	Yes	No	Include books:	Yes	No	
Dollar Amount: \$	Dollar Amount:	\$		Dollar Amount: \$	5		Dollar Amount	: \$		
Include books: Yes No	Include books:	Yes	No	Include books:	Yes	No	Include books:	Yes	No	
Distribution*:	Distribution*:			Distribution*:			Distribution*:			
* If award is less than 100% use thi	s to request a dis	stribution c	ther th	an tuition, fees, roo	om, board	d, then b	ooks.			
Housing Choice for Year 1:				Meal Plan Choice	e for Year	1:				
Residential College – Double			Unlimited Meal Pla							
Residential College – Singl	e			19 Meal P						
University Village	loaco)			14 Meal P Block Mea	-	15	50	100	175	
Off Campus (must submit lease) Living at Home with Parent/Guardian				No Meal F		13	50	100	1/5	
1 <sup>st</sup> Signature/Approval										
Head Coach Signature:					Da	ate:			<del></del>	
2 <sup>nd</sup> Signature/Approval Academics Signature:					Da	ate:				
3 <sup>rd</sup> Signature/Approval									<del></del>	
Sport Supervisor Signature:					Da	ate:				
Please submit this completed for	m ( <b>including all s</b>	ignatures)	to the c	compliance office v	vho will p	repare t	wo sets of docu	ments ar	nd return	
them to the head coach. The head	d coach is respon	-		e documents and f spect's signature.	forwardin	g them	to the prospect	at the ap	propriate	
u			the pro-							
For Compliance Office Use Only Amateurism Questionnaire Date:				IRL Date:						
Active in Transfer Portal:		 No	 N/A	INL Date.						
Compliance Approval:					Da	ate:				