

Walsh College 2009/2010 Financial Aid Supplemental Worksheet

Student Name _____

Walsh ID _____

Social Security Number _____

Daytime Phone () _____

Evening Phone () _____

E-mail _____

Section 1: Federal Family Education Loan / William D. Ford Direct Loan Counseling

This section must be completed (even if you do not plan to obtain a student loan.)

Federal law indicates that institutions counsel each loan borrower under the Federal Family Education Loan / William D. Ford Direct Loan Program(s) prior to the release of the borrower's loan disbursement(s). As a potential borrower at Walsh College, please read the following information carefully, checking off each section as you complete your review:

- I understand that if I decide to borrow a student loan through the Federal Family Education Loan / William D. Ford Direct Loan Program(s):
- I will be entering into a serious financial obligation. Upon entering repayment, I will be expected to make regular and timely payments on my educational loan obligations.
- I may suffer certain consequences if I should default on my student loan. These consequences include, but are not limited to, denial of future financial aid, adverse credit reports, tax refund forfeiture, and litigation procedures.
- I am obligated to repay the full amount of my loan(s) even if I do not complete my coursework/program at Walsh College, or if I am unable to obtain employment upon completion of my Walsh College program, or if I am otherwise dissatisfied with the educational services provided by Walsh College.
- Current loan regulations require that a student be continuously enrolled at least half-time from the beginning of the loan period to be eligible for any second or subsequent disbursement(s) of that loan. If I withdraw below half-time during the loan period, any second or subsequent disbursement(s) for that loan period will be returned to my lending institution.
- I will be required to attend an entrance and exit counseling session, at which time, I will receive information on my rights and responsibilities pertaining to my educational loan.

Section 2: Dependent Care

If you would like us to consider any dependent care expenses in your cost of attendance to determine your eligibility for financial aid, we must have the following information:

For how many dependents will you pay child care or elder care expenses **while** you are attending class? _____

Section 3: Outside Funding

Please indicate the source and total annual amount of any outside funding that you will receive for your educational expenses for the academic year (Fall, Winter, Spring, Summer).

VA, Voc Rehab, and/or MI Works	FA\$ _____	WIS _____	SP\$ _____	SU\$ _____
Employer Tuition Payment or Reimbursement	FA\$ _____	WIS _____	SP\$ _____	SU\$ _____
Other (indicate source and amount)	FA\$ _____	WIS _____	SP\$ _____	SU\$ _____

Note: You must notify the Financial Aid Office in writing if you will receive outside funding (e.g. VA benefits, vocational rehabilitation benefits, etc.)

Section 4: Certification Section

I/we certify that all of the information on this Supplemental Worksheet is true and complete to the best of my/our knowledge. If asked by a college official, I/we agree to give documented proof of the information that I/we have given on this form. I/we understand that failure to provide documentation requested, may result in denial of consideration for financial aid for the 2009–2010 academic year.

I authorize the use of any Title IV moneys awarded to be used to pay for the cost of books, supplies and fees charged to my tuition account. I certify that, as a condition of my Title IV, I will not engage in the unlawful manufacture, distribution, dispensation, possession or use of a controlled substance during the period covered by my Title IV aid.

Student signature _____

Date _____

Note: This form is required for all Financial Aid applicants. THIS IS NOT A LOAN APPLICATION. A separate loan request form will be sent with your award letter.