



# HIGHLAND COMMUNITY COLLEGE

## Application for Financial Aid

THIS AID APPLICATION IS \_\_\_\_\_First time application \_\_\_\_\_Renewal application

### STUDENT INFORMATION

STUDENT'S NAME \_\_\_\_\_

OTHER NAMES USED \_\_\_\_\_

PERMANENT MAILING ADDRESS \_\_\_\_\_  
number street apt. no.  
city county state zip

CURRENT ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_

CURRENT PHONE \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

Your Social Security number will be used as an identifier to assist in matching your forms. Failure to provide it will delay processing.

DATE OF BIRTH \_\_\_\_\_

IF YOU ARE NOT A U.S. CITIZEN, ARE YOU NOW OR DO YOU INTEND TO BECOME A PERMANENT RESIDENT?

\_\_\_\_\_YES \_\_\_\_\_NO

HIGH SCHOOL \_\_\_\_\_

GRADUATION DATE \_\_\_\_\_

#### POSTSECONDARY EDUCATIONAL HISTORY:

List all educational institutions beyond high school you have attended. BE SURE TO INCLUDE THE INSTITUTION YOU ARE CURRENTLY ATTENDING.

School	State	Credit Hours	Date From	To

Total Credit Hours

ENROLLMENT STATUS \_\_\_\_\_ full-time \_\_\_\_\_ part-time

MAJOR AREA OF STUDY \_\_\_\_\_

#### ANTICIPATED "OUTSIDE" SOURCE AWARDS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### LIVING ARRANGEMENTS

\_\_\_\_\_Campus housing  
\_\_\_\_\_Off campus  
\_\_\_\_\_With parents

IF YOU ARE LIVING OFF CAMPUS, HOW MANY MILES WILL YOU COMMUTE ONE WAY?

\_\_\_\_\_

#### WILL YOU BE ENROLLING IN

\_\_\_\_\_On-campus classes  
\_\_\_\_\_Off-campus classes  
\_\_\_\_\_Both on- and off-campus classes

