

2020 SUMMER SUPPLEMENTAL APPLICATION

The priority consideration date complete this form and return it Name:	to the Financial Aid Office		ner aid is June 30, 2020 .
Address:		City, State, Zip:	
E-Mail:		Phone:	
NOTE: Financial aid eligibility for the federal processor no later than June			
All financial ai	d packages will be awarded	based on an assumed 6-8 credits of	of enrollment.
To be eligible to receive federal loa eligible program for the purpose of enrollment level.			
1. Would you like to be considered for maximum student loan assistance?			YesNo
2. Would your parents like to be considered for a PLUS loan? (For parents of dependent students only)			Yes No
3. Will you be applying for a summe	Yes No		
4. Have you attended any schools of	ther than Miles Community C	College since May 1, 2020?	YesNo
If yes, please list: School name	Dates attended	School name	Dates attended
	/to/		/ to/
5. During the 2020 Summer Session educational grants, fellowships, or a If yes, please list type and amount.		ocational rehabilitation benefits, sch	olarship assistance, or any otherYesNo
6. Are you taking <u>only</u> online classe	s?		Yes No
7. How many credits will you be en	nrolled during Summer Session	on?	
	IV loan at any institution. I a	e best of my knowledge, I do not ow lso understand that if I fail to attend ny being subject to full or partial rep	or complete any class on which
Signature:		Date:	