2016 - 2017 Non Need Application

Students should complete this form who are not intending to file the FAFSA (Free Application for Federal Student Aid) or who are ineligible to file. This application will allow the Financial Aid office to award institutional funds only.

Statement of Understanding

I will report to the Financial Aid Office any additional financial aid received and any changes in my financial or marital status. I authorize the Financial Aid Office to discuss my application and my financial situation with, and provide necessary academic information to, public or recognized private agencies which may also be considering me for financial aid. I am aware that the payment of financial aid or continued employment depends upon my maintaining satisfactory academic progress, being enrolled full time student during the academic year, and remaining an eligible student. I am responsible for repaying any funds that I receive which cannot reasonably be attributed to meeting my educational expenses related to Concordia. I further understand that the amount of any repayment is based on federal regulations.

What to do:

Complete steps 1-4 and sign the Non Need Application. Make sure to read and answer all questions as errors can delay the processing of your financial aid.

1. Student Information

Name:_____ Student ID Number:F00_____

Address:_____ Date of Birth:_____/_____/_____

City, State, Zip:_____ Phone Number:_____

2. General Information

Are you a United States Citizen?

Yes _____ / _____-_____-_____ No, I am from _____

(Social Security Number) *(Country)*

Are you planning on filing the FAFSA?

Yes _____ No_____ No, I am ineligible_____

3. Enrollment Intentions (check one)

While enrolled, I intend to live:

With Parents _____ On Campus _____ Off Campus _____

My grade level will be:

Freshman_____ Sophomore _____ Junior_____ Senior _____

Period I will use the aid:

Fall 2016 _____ Winterim 2017 _____ Spring 2017 _____ Summer 2017 _____

I will enroll full time (12 credits) for each semester.

Yes _____ No – if no, how many? _____

4. Certification

By signing this application, I certify that all the information reported to qualify for student aid is complete and correct.

Students Signature:_____ Date: _____

Concordia University Main Office • 12800 N. Lake Shore Drive • Mequon, WI 53097 • (262) 243-4569 • (262) 243-2636 Fax • finaid@cuw.edu
Concordia University Michigan Office • 4090 Geddes Road • Ann Arbor, MI 48105 • (734) 995-7408 • (734) 995-7448 Fax • finaid@cuaa.edu