

UNIVERSITY of WISCONSIN
LA CROSSE

FA17-09/10(01/09)

2009-10 FINANCIAL AID INFORMATION FORM (FAIF)

1. Your name: _____ SS# or
(Last) (First) (M.I.) Maiden ID# _____
2. Your permanent mailing address: _____
(Street and #) (City) (State) (Zip Code)
3. Your 2009-10 campus address: _____
(Street and #) (City) (State) (Zip Code)
4. Your date of birth: ____ / ____ / ____ 5. Your gender: Female Male 6. Cell Phone # _____
7. You are a resident of what state: WI MN Other 8. Are you a U.S. citizen? Yes No
9. Name of High School/Graduation Date: _____ / _____
10. Your marital status: Single Married Separated Divorced Widowed
11. What is your ethnic background (required for government compliance)?
 Native American Black American Hispanic S.E. Asian Other Asian White
12. Your academic major, if declared: _____ 13. Expected UW-L Graduation Date: _____
14. Fall 2009-10 classification: Freshman Sophomore Junior Senior Grad 2nd Degree Special
15. Spring 2009-10 classification: Freshman Sophomore Junior Senior Grad 2nd Degree Special
16. No. of college/university credits earned as of Aug. 2009? _____ No. of semesters completed? _____
17. When did you last attend UW-La Crosse? _____
18. Will you attend UW-La Crosse in Fall 2009? Yes No Spring 2010? Yes No
19. How many credits do you estimate you will take in Fall 2009 _____ In Spring 2010 _____ (Fulltime is 12+ credits)
20. What other colleges, universities or technical schools have you attended? When?

Dates: _____

Dates: _____
21. Where will you live during the school year: UW-L Residence Hall With family Off campus housing
22. Have you ever been convicted of any illegal drug offense while receiving financial aid? Yes No
23. I will study abroad _____ Fall 2009 _____ Spring 2010
24. Are you a transfer student to UW-L beginning in January of 2010 (Spring Semester)? Yes No
If yes, what school, if any, are you attending in fall of 2009? _____
25. Are you interested in work-study? Yes No

(over)

Financial Aid Office

215 Graff Main Hall, University of Wisconsin-La Crosse, 1725 State Street, La Crosse, WI 54601

Phone: (608)785-8604, Fax: (608)785-8843

www.uwlax.edu/finaid • e-mail:finaid@uwlax.edu

An affirmative action/equal opportunity employer

26. During the 2009-2010 school year, will you receive money from any of these sources:

Yes No

Vocational Rehabilitation

Graduate Assistantship

Resident Hall Assistantship

ROTC Scholarship/Stipend

Employee Tuition Reimbursement \$ _____

Americorp _____

Wisconsin GI Bill Tuition Waiver

State Veterans Education Benefits

Chapter 30 \$ _____ per month; No. of months _____

Chapter 31 \$ _____ per month; No. of months _____

Chapter 33 \$ _____ per month; No. of months _____

Chapter 1606 \$ _____ per month; No. of months _____

Chapter 1607 \$ _____ per month; No. of months _____

Chapter 35 (Dependent/Spouse of Veteran)

\$ _____ per month; No. of months _____

Other VA/Reserve/National Guard/State Veterans Educational Benefits (list benefit) _____

\$ _____ per month; number of months _____
or Reimbursement Amount \$ _____

Private Scholarship \$ _____ per year;
Source _____

\$ _____ per year;
Source _____

\$ _____ per year;
Source _____

Other _____

27. If you have unusual circumstances or special situations, please explain below:

28. **PARENT SIGNATURE(S)** (If parental information is required on the Free Application for Federal Student Aid (FAFSA))

I authorize the UW-L Financial Aid Office to share information from my child's financial aid file with my son or daughter. All information on this form, on my federal income tax form, and on my son's or daughter's FAFSA is true and complete to the best of my knowledge.

I understand that the UW-L Financial Aid Office may request federal and state income tax forms and other documents in order to complete federal, state, or institutional verification of my son's or daughter's financial aid application.

Signature of Father/Step-father _____ Signature of Mother/Step-mother _____

29. **STUDENT SIGNATURE**

I understand that, in order to apply for grants, student loans, or Federal Work-Study employment, a 2009-2010 Free Application for Federal Student Aid (FAFSA) must be filed using 2008 Federal Income Tax Forms. Applying before March 15, 2009, assures first consideration for funding. Late applicants will be considered for residual amounts. A separate UW-L institutional application form must be filed in order to apply for financial aid for the 2009 or 2010 Summer Sessions. I understand that I am responsible for the completion of my financial aid application. Once assigned a UW-L email address, I understand that email is an official form of communication in the University of Wisconsin System and I will be receiving important financial aid information at my UW-L email address and at the WINGS Student Center on-line. I further understand that when my application/file is complete that my financial aid award will be made available via the WINGS Student Center on-line. I understand that I must make sufficient academic progress to remain eligible for financial aid. All information on this form, on my federal income tax form, and on my FAFSA is true and complete to the best of my knowledge. I authorize the UW-L Financial Aid Office to share information from my financial aid file with any member(s) of my family whose information was required to be on the FAFSA and with any agencies that need that information for financial aid or scholarship programs. I understand that the UW-L Financial Aid Office may request federal and state income tax forms and other documents in order to complete federal, state or institutional verification of my application.

Date 2009-2010 FAFSA was filed: _____ Today's Date: _____

Student's Signature _____

REMINDER: Financial Aid Awards will be available through the WINGS Student Center on-line