

NPRC SUMMER 2024 INSTITUTIONAL AID APPLICATION

Please complete this form for consideration of any institutional aid available to you for the summer 2023 term. Please complete this form **AFTER** you have fully registered for all intended summer classes. Please note, aid may adjust if student withdraws or unenrolls from any classes. Student should contact the financial aid office with any changes to enrollment status. Our office can be reached at: financialaid@rrcnpa.org.

STUDENT INFORMATION

Name: _____ ID number: _____

Date of Birth: _____ Telephone: _____

Email: _____ Street address: _____

City of Resident: _____ Zip: _____ County of Resident: _____

*If you have not lived in the city or county for 12 months prior to enrollment, please provide previous:

Number of Credits Enrolled Summer Term (include all session credits): _____

Are you a returning student? Yes _____ No _____

Are you a new student for summer 2023? (never attended NPRC prior to summer 2023):

Yes _____ No _____

If you answered YES to being a completely new student, PLEASE COMPLETE the following information. If you answered above that you are a returning student, you are done with this form.

! .

SECTION 1

- 1) Are you currently married? Yes _____ No _____
- 2) Are you a veteran or currently serving in the US Armed Forces for purposes other than training? Yes _____ No _____
- 3) Have you received a High School diploma? Yes _____ No _____
- 4) If you do not have a High School diploma have you received a HS Equivalency diploma (GED or CSSD) Yes _____ No _____
- 5) Other than classes taken while still in high school, is this the first time you have attended any college? Yes _____ No _____
- 6) Do you have a legal guardian other than your parents? Yes _____ No _____
- 7) Were you an Orphan or Ward of the Court? Yes _____ No _____
- 8) Do you have legal dependents or child(ren) for whom you provide greater than 50% financial support? Yes _____ No _____
- 9) Do you receive child support? How much annually _____

SECTION 2

- 1) If you are considered DEPENDENT for financial aid, enter the number in your parent's household. Include yourself even if you do not live with parent(s). If INDEPENDENT, include yourself, spouse (if married) and children living with you.

Number in household _____

- 2) Enter the number of people in your/your parent's household attending college at least half time during the academic year for which you are applying. Include yourself even if you are not attending at least half time. Do not include parent(s).

Number in college _____

Type your name below as an electronic signature. If you are a DEPENDENT for financial aid purposes your parent is required to sign.

Student signature _____

Parent signature (if student is Dependent) _____

Signature Date _____