Attachment D

AEF Scholarship Application | Financial Need Sheet

Student: Fill out this top portion only and submit it to your school's Financial Aid Office.

Name _____ Student ID _____

Address _____ Phone _____ Date _____

I give permission for (university/training institution) _____ to release financial and academic information to the Arctic Education Foundation.

Signature Date

Financial Aid Office: Please complete this form and return it to the Arctic Education Foundation. Please fill in the expenses portion even if other resources information is unavailable.

Academic Term: _____

Student's Financial Need: **Expenses**

Tuition	$ _____
Fees	$ _____
Books	$ _____
Room & Board	$ _____
Other: (specify) _____	$ _____
_____	$ _____
Total Budget:	$ _____

Student is: ☐ Full-time ☐ Part-time

School calendar runs on:

☐ Semesters # of Semesters _____

☐ Quarters # of Quarters _____

☐ Other: _____

Need cannot be determined because:

_____

	List Funding Resources	Term/Semester or Quarter	
Grants	Institutional Scholarship		
	Other Scholarships		
	Pell Grant		
	SEOG		
	Tribal Assistance		
	Tuition Exemption		
	Veteran's Benefits		
	Other (specify)		
Loans	Alaska Student Loan		
	Perkins Loan		
	Guaranteed Student Loan		
Personal	AFDC or Welfare		
	Parent/Spouse Contribution		
	Student Contribution		
	Work Study Program		
	Other (Specify)		
	Total Resources:		
	Unmet Need:		

FAO Name _____

Email _____

Address _____

Phone _____ Fax _____

FAO Signature _____

Date _____

Financial Aid Office: Please complete and return to student.

If you have questions, please contact the AEF team at:

Phone: (907) 852-9456 or (907) 852-9404

Email: arcticed@asrc.com