



SUMMER 2017 ONLY FINANCIAL AID APPLICATION

Review the Galveston College 2017 Summer Credit Schedule before placing a check mark in front of the session for which you are requesting aid. (Note that there are summer sessions which have courses that meet for 5 or 10 weeks.)

A. ___ Summer I- 5 week course (Including Mini) Hours: _____

B. ___ Summer II- 5 week course Hours: _____

C. ___ Summer-10/13 week course Hours: _____

Accepted into a Health Science or Vocational/Technical Program: <input type="checkbox"/> Yes, _____ <input type="checkbox"/> No

PLEASE TYPE OR PRINT:

1. Name _____
Last First M.I. Previous/Other Names

2. Social Security Number ____ - ____ - ____ ID # _____ 3. Phone () ____ - ____

4. Mailing Address _____
Number/Street Apt. # City State Zip Code

Academic Major: _____ Anticipated Graduation Date: _____

Check all that Apply:
____ High School Diploma Received. Graduation Date _____ City, State _____
____ GED Received. Date _____
____ Neither

Direct Stafford Loans:

Students who wish to apply for student loans for Summer 2017 must attend an Entrance Counseling Session. Please contact the Financial Aid Office for more information.

Did you receive a Direct Stafford loan for Fall 2016 and/or Spring 2017? ___ YES ___ NO

College Education (Check one only)

____ I did not attend any college (including Galveston College), university, trade school, etc.
OR
____ I did attend the following college(s) (including Galveston College) university, trade school, etc.

List below each school attended, including **Galveston College**.

COLLEGE NAME | LOCATION (CITY, STATE) | DATES ATTENDED

MONTH/YEAR TO MONTH/YEAR

A. _____ | _____ | ____ / ____ TO ____ / ____

B. _____ | _____ | ____ / ____ TO ____ / ____

C. _____ | _____ | ____ / ____ TO ____ / ____

Student Signature

Date