



100 West College Street / Sumter, South Carolina 29150 / (803) 934-3245 or 934-3238 / Fax (803) 773-3687

APPLICATION FOR FINANCIAL AID

An application for financial aid is not complete without a Free Application for Federal student aid (FAFSA). Students (Student Aid Report) are reminded to mail the financial aid form as soon as possible. No financial aid can be awarded until the Student Aid Report has been received in the Office of Financial Aid. You must be admitted by the college before aid can be awarded. **Important:** A signed copy of your parents' federal income tax return form 1040 - 1040A must be submitted to the Financial Aid Office. Independent students must submit your spouse's form 1040 - 1040A.

I. Name _____ Soc. Sec. # _____
Last First Middle

Home Address _____

City, State, & Zip Code _____

Telephone Number _____ Date of Birth _____

Male Female Unmarried Married

II. Educational Information

How will you be classified during the period covered by this application? (check two)

New Returning Transfer Transient
 Freshman Sophomore Junior Senior

What is/was your first period of enrollment at Morris? _____

When do you expect to graduate from Morris? _____

What is/will be your major? _____

Will you be a full-time student during the period covered by this application? _____ If no, number of credit hours _____

What period will be covered by this application? Fall Spring Summer I Summer II

III. Family Information

A. Name of Parents/Guardians/Spouse _____

B. Address of Parents/Guardians/Spouse _____

_____ Telephone # _____

C. Occupation of: Father _____ Mother _____ Spouse _____

D. Are you a citizen of the United States? Yes No

E. Have you and your family been living in South Carolina a year prior to enrollment? Yes No
(This is determine eligibility for State Aid)

IV. Where do you plan to live during the period covered by this application?

College Housing Parents' Home Other (specify) _____

V. Benefits from other aid programs: Veterans' Benefits (amount per month) \$ _____

AFDC (amount per month) \$ _____ Other Benefits \$ _____

Specify any other loans or scholarships and give amount _____

VI. Please check the types of financial aid you will accept:

Grants Part-Time Employment Scholarships Loans

VII. List work experiences and skills you have that will be helpful in job placement _____

VIII. Have you ever received a student loan? Yes No If yes, are you in default? Yes No

APPLICATION FOR FINANCIAL AID — reverse side

IX. If you are a returning student, please list the Work-Study Jobs you have held at Morris College in the past:

X. Have you previously attended a college, university, or technical school? Yes No
If yes, please complete the information below:

A. School Name: _____	C. School Name: _____
Address: _____	Address: _____
City & State: _____	City & State: _____
Date Attended: _____	Date Attended: _____
B. School Name: _____	D. School Name: _____
Address: _____	Address: _____
City & State: _____	City & State: _____
Date Attended: _____	Date Attended: _____

XI. Certification Statement on Refunds and Default

I certify that I do not owe a refund on any grant or loan, am not in default on any loan or have made satisfactory arrangements to repay any defaulted loan, and have not borrowed in excess of the loan limits, under Title IV programs, at any institution.

XII. Statement of Educational Purpose

I will use all Title IV money received only for expenses related to my study at Morris College.

XIII. Statement of Selective Service Registration Status

- I certify that I am registered with Selective Service.
- I certify that I am not required to be registered with Selective Service because:
 - I am female.
 - I am in the armed services on active duty. (Note: Does not apply to members of the Reserves and National Guard who are not on active duty.)
 - I have not reached my 18th birthday.
 - I was born before 1960.
 - I am a resident of the Federated States of Micronesia or the Marshall Islands, or a permanent resident of the Trust Territory of the Pacific Islands (Palau).

XIIV. Authorization of Attorney-in-Fact:

I do hereby appoint the President and/or Business Manager of Morris College to be my Attorney-in-Fact to execute any instrument for me; to sign and endorse my name to any check or other evidence of money due me; to apply the proceeds of any funds due me to my obligations to Morris College; to receipt for same and turn over to me any balance due after payment of said obligation to Morris College; and I hereby ratify and confirm any and all acts done by my Attorney-in-Fact in the premises.

I certify that the information that I have presented in this application is correct, and I understand that if I have knowingly falsified any such information, then any financial aid awards that I receive as a result of this application may be revoked and any funds that I receive as a result of such awards may have to be repaid.

_____ Date

_____ Signature of Student

Warning: To receive any Title IV financial aid, you must complete the Statement of Educational Purpose and Certification Statement on Refunds and Default, and you must be registered with Selective Service, if you are required to register. If you purposely give false or misleading information, you may be subject to a fine of up to \$10,000, imprisonment for up to 5 years, or both.