

RICH MOUNTAIN COMMUNITY COLLEGE 2010-2011 FINANCIAL AID APPLICATION

**EVERY ITEM MUST BE COMPLETED
BEFORE FINANCIAL AID AWARD CAN BE PROCESSED**

Social Security #: _____ - _____ - _____

Name: _____
Last First M.I. (Maiden Name)

Address: _____
Street City State Zip Code

Female: _____ Male: _____ Date of Birth: _____ / _____ / _____

Home Phone #: (____) _____ Work Phone #: (____) _____

Cell Phone #: (____) _____

Will you be paying childcare while attending class? Yes _____ No _____
If yes, please attach a statement from childcare provider for cost per week, for each child.

Are you or will you be applying for Veteran's benefits? Yes _____ No _____

Have you received: High School Diploma _____ GED _____
If so: When: _____ Where: _____

What degree plan are you enrolled in: _____

Semester aid is requested for (check each semester that applies):
Fall _____ Spring _____ Summer _____

Have you ever attended RMCC? Yes _____ No _____

If yes, did you receive Financial Aid? Yes _____ No _____

List ALL universities/colleges/technical schools previously attended (including RMCC):

List any scholarships or sources of aid that you expect to receive for this award year and the amount:

**APPLICANT MUST COMPLETE
GENERAL CERTIFICATION ON BACK OF THIS FORM!**

GENERAL CERTIFICATION

My signature on this document certifies that:

I authorize the Financial Aid Office to:

- Credit any Title IV or other financial aid program funds for any institutional charges I may incur, in addition to tuition, books, and fees, if applicable. I understand that this authorization is not mandatory and is valid for one year and that if I wish to rescind this authorization I may do so by notifying the Financial Aid Office in writing.
- Access my academic records as needed to help determine my eligibility for aid.

Family Education Rights & Privacy Act (FERPA):

I authorize the release of information about my financial aid to any of the appropriate agencies contributing to my financial being. (i.e. Department of Human Services, Rehabilitation Services, Health Department, Employment Office, Housing Authority, Private Organizational Scholarships, banks, etc.)

I authorize consent to release any or all RMCC financial aid records to the following Parent, guardian, and/or family member:

Name	Address	Phone	Relationship

[Note: under Federal law, education records may not be disclosed to parents of dependent students (as defined under the Internal Revenue Code) without the consent of the student. 34 CFR § 99.31 (a)(8).]

My signature below states I understand that my written consent will remain in effect for the 2010-2011 Financial Aid year or until I notify the RMCC Financial Aid Office in writing, to cancel the consent.

Furthermore, my signature implies that I agree to the terms set forth by this form, releasing RMCC Financial Aid Office from all legal responsibilities or liabilities due to information released to any third party individual or agency as a result of my consent.

I have received, read, and understand the Rich Mountain Community College:

- Financial Aid Satisfactory Academic Progress Policy;
- Rights and Responsibilities for receiving financial aid in the RMCC 2010-2012 College Catalog and Student Handbook;
- Refund/Repayment Procedures in the RMCC 2010-2012 College Catalog;
- The Campus Security Act of 1990 Report in the Student Handbook; and
- The RMCC College Policies & Procedures in the Student Handbook.

I understand that the above information is available on the RMCC website and these documents or postings can be reviewed at any time.

I certify that I do not owe a refund on any grant or loan, am not in default on any loan, under Title IV programs, at any institution. I will use all Title IV money received only for expenses related to my study at RMCC. I further understand that under RMCC's academic requirements for receiving financial aid, my academic record will be reviewed at the end of each semester and that if I am not in compliance with the requirements, I could be placed on financial aid probation, or I could be suspended from receiving financial aid.

I further certify, under penalty of perjury, that the information submitted on this application and all supporting documentation is true and correct to the best of my knowledge; that I fully understand the obligations incurred by my acceptance of any aid granted to me as a result of this application; and that any violation by me of any statements may subject me to forfeiture of my student financial aid award for the year of this application and/or denial of eligibility for renewal for the next academic year. I further understand that it is my responsibility to know and be in compliance with all financial aid policies and procedures.

Student: _____ Date: _____