

Smith Aid Application for Ada Comstock Scholars

2011-2012

Name		ID No.
Estimated Graduation Date	E-mail Address at Home	

The information you provide on this document will help us determine your eligibility for aid in 2011-2012.

Enrollment plans for 2011-2012

- Estimated number of credits: _____ Fall Semester _____ Spring Semester
- Housing (check one):
 - College housing (Dormitory)
 - Off campus (includes college-owned apartments)
 - Transient housing
 _____ Number of nights in transient housing desired per week
- Number of miles from home to campus (one way) _____

Household Information

Give information for yourself and all others in your household for 2011-2012, whether enrolled in school/college or not, and notify us of changes. Include anyone dependent on you for support or anyone who shares the support of the household. Attach an extra page to list additional members.

Full Name	Age	Relationship	If school age, name of school/college in 2011-12

Educational Expenses

- | | | | |
|----------------------------------|----------|--------------------------------|----------|
| A. Books and Supplies | \$ _____ | E. Senior project (department) | \$ _____ |
| B. Child Care | \$ _____ | F. Course or lab fees (course) | \$ _____ |
| C. Medical supplies or treatment | \$ _____ | G. Required summer study | \$ _____ |
| D. Other (explain) _____ | \$ _____ | (for shortage or acceleration) | |

Outside Scholarships and Loans (Policy can be found at www.smith.edu/finaid.)

If you expect to receive any outside scholarship or loan awards for 2011-2012, please complete the information below. Do not include Federal Pell or State grants, Federal Direct or Perkins loans.

Name of award	Amount	Type (Scholarship or loan)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

It is your responsibility to inform us of outside aid; if we learn of any outside awards after July 1, the grant portion of your award may be reduced by the full amount of the award.

Income Information

1. Your employer/occupation _____
 Employer's Address _____

 Will you continue to work for this employer during the
 2010-2011 school year? Yes No

2. Are you or your spouse self-employed? Yes No
 Does the family hold an interest in any business or farm?
 Yes No
 Title(s) or position(s): _____

If either answer is yes, a CSS Business/Farm Supplement is required.
 Send a copy of the most recent IRS corporate or partnership return if other
 than sole proprietorship.

3. Spouse's employer/occupation _____
 Employer's Address _____

4. Indicate the expected summer/school-year income from work for you and your spouse.

Summer 2011 (3 months)	School Year 2011-2012	Summer 2011 (3 months)	School Year 2011-2012
By you	_____	By Spouse	_____

5. Indicate expected 2011-12 monthly income from these sources:

AFDC/TAFN _____	Medicare _____	Employer Tuition Benefits _____
Day Care Vouchers _____	Social Security _____	Worker's Compensation _____
Child Support _____	Rehabilitation Program _____	Aid to the Elderly/Disabled _____
Housing Assistance _____	Education/Training _____	Assistance from Friends/Relatives _____
Food Stamps _____	Veteran's Benefits _____	

Statement of Eligibility

I certify that I, the student, am not in default on any Federal Family Educational Loan Program (Guaranteed Student Loan/Stafford Loan, National Direct/Defense/Perkins Loan, or PLUS/SLS Loan) and that I do not owe a refund on any Federal Title IV - Higher Education Act grant (Pell, Supplemental Educational Opportunity Grant or State Student Incentive Grant) for attendance at Smith College or any other educational institution and I do not own property subject to a judgment lien for a debt owed to the United States.

 Your Signature (Student) Date Your Spouse's Signature (if married) Date

****If you are in default, or owe a refund, contact Student Financial Services immediately.****

Student Account Authorization

I, the student, authorize Smith College to apply Federal Title IV financial aid funds to allowable institutional charges such as tuition, room, board, and required fees and also to other educationally related expenses that might be posted to my student account.

Examples of other charges are computer software and equipment, optional health insurance charges and other medical expenses, late payment fees and bad check fines, library fines and miscellaneous housing charges.

I understand that this authorization can be rescinded at any time by submitting a signed statement to the Office of Student Financial Services.

Authorization: Yes _____ No _____

*** If you are not required to file a 2010 tax return, please complete a Non-Filer Statement found on our website at www.smith.edu/finaid/curada.php**