

SUPPLEMENTAL FINANCIAL AID APPLICATION

SBVC

2007-2008

PRIORITY DEADLINE: This supplemental form must be received by the Financial Aid Office, and a 2007-2008 Free Application for Federal Student Aid (FAFSA) or Renewal FAFSA must be filed with San Bernardino Valley College (federal code 001272) listed as an institution, by May 25, 2007 to receive priority processing.

If any item is left blank or incomplete on any financial aid application or form, the form will be returned to the student. **THIS WILL DELAY PROCESSING.**

Forms received after May 25, 2007 will be processed in the order in which they are received.

1. Your name _____
Last First M.I.
2. Your address _____
Number, street and apartment number
- Phone# _____
- City, State and zip code

PLEASE NOTE: Is this the same address that is on record in the Admissions Office? Yes___ No ___
If not, please submit a Change of Address form to the Admissions Office as this is the address used for mailing the Financial Aid checks.

3. Social Security Number XXX-XX-_____
 SBVC ID# _____
4. Other names used _____
5. Please list below what school you will attend each semester:
- | | |
|-----------|--------|
| | School |
| Fall 07 | _____ |
| Spring 08 | _____ |
| Summer 08 | _____ |
6. Would you like to be considered for a part-time work-study job during the 07-08 school year?
 Yes No
7. What is your current Educational Goal? *Circle one*
 Certificate AA Degree Transfer Other
- If Certificate/Other, please list _____
8. Have you attended any college or school beyond high school? yes no

If yes, list below **all colleges or schools** that you have attended. List most recent college first.

Name, city, and state of college	Period of Attendance		# Of Units Completed	Received Degree?	Received Financial Aid? Yes/No
	From (mo./yr)	to (mo./yr)			

NOTE: You may not receive Financial Aid at two different schools for the same term and/or enrollment period.

(Please continue on back of form)

9. Education

- I am a High School Graduate* ()
- I have a G.E.D. ()
- I passed the California High School Proficiency Exam ()
- I passed an Ability to Benefit Test (ATB) () Location: _____
- I will graduate in June 2007* ()

**For 06 and 07 high school grads, "high school graduate" means meeting all requirements for graduation AND passing the California High School Exit Exam (CAHSEE).*

I am NOT a High School Graduate/I do NOT have a G.E.D. ()

10. Write the names of all household members in the space(s) below. Also write in the name of the college for any member of the household who will be attending at least half-time between July 1, 2007 and June 30, 2008 and will be enrolling in a degree, diploma, or certificate program. *(Do not include the name of the college for your parents)* If you need more space, attach a separate page. Please note: these are the same instructions you used when completing the FAFSA.

READ THE INSTRUCTIONS ABOVE BEFORE COMPLETING					
First and last name of family member	Age	Relationship	Will person attend college at least half-time in the 2007-08 school year?	Name of college the person will attend in the 2007-08 school year	Will person be employed between 7/1/07 and 6/30/08?
1		self	<input type="checkbox"/> YES <input type="checkbox"/> NO	San Bernardino Valley College	<input type="checkbox"/> YES <input type="checkbox"/> NO
2			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
3			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
4			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
5			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
6			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
7			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO
8			<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO

I certify that, as of the date I signed my Free Application for Federal Student Aid (FAFSA) or renewal FAFSA, all information provided is true and complete to the best of my knowledge. If I am asked, I agree to give proof that my information is correct. This proof might include a copy of the 2006 U.S. Income Tax Form filed by me or my parents. I understand that purposely giving false or misleading information on any application may be cause for denial, reduction, withdrawal, and/or repayment of any financial aid and may also lead to a \$10,000 fine, a prison sentence, or both. In addition, I authorize San Bernardino Valley College to release enrollment and financial data to organizations or agencies to which I have applied for assistance. I authorize San Bernardino Valley College to deduct financial obligations owed to the College from any financial aid I receive.

Student's Signature: _____ Date: _____