CLARK STATE
COMMUNITY COLLEGE

Summer 2008 Financial Aid Supplemental Form

Only complete this form if you are requesting aid for Summer Quarter

Priority filing deadline:
March 15, 2008

Last name First Middle initial Social Security Number

Maiden name (or any former name)

Permanent address (include apartment number)

City State Zip Phone number

1. Intended major or program at Clark State Community College_____

Summer enrollment status

❑ Full-time (12 + hours)
❑ 3/4 time (9-11 hours)
❑ Half-time (6-8 hours)
❑ Less than half-time (0-5 hours)

Note: Changes in enrollment status must be reported to the Financial Aid office. Your award will change as your enrollment status changes.

1. I am requesting a Federal Pell Grant for three of the following quarters:

	Summer 2008	Fall 2008	Winter 2009	Spring 2009
Federal Pell Grant	❑	❑	❑	❑

2. I am requesting a Federal Stafford loan for:

	Summer 2008	Fall 2008	Winter 2009	Spring 2009
Federal Stafford Loan	❑	❑	❑	❑

Student's signature Date