



2016-2017 Application for Financial Aid

Mailing Address: Financial Aid Office, Davis Applied Technology College, 550 E. 300 S. Kaysville, UT 84037-2699

Phone (801) 593-2482 Fax (801) 593-7982

Please complete all information in ink. PRINT clearly!!

A. STUDENT INFORMATION:

Name _____ Social Security Number _____ Phone Number _____

Street _____ City _____ State _____ Zip _____ E-mail _____

B. COMPLETE THE FOLLOWING STEPS:

1. Review the DATC Financial Aid Handbook located on our web site at www.datc.edu/financialaid
2. Complete and sign "Application for Financial Aid" (this Form).
3. Submit a copy of your High School Diploma or GED.
4. You may be asked to provide some or all of the following documents:
 - Student's 2015 **tax return transcript** from IRS if filed and W-2's.
 - Spouse's 2015 **tax return transcript** from IRS if filed and W-2's even if you were not married in 2015.
 - Parent's **tax return transcript** from IRS and W-2's if you could not answer Yes to any question in Step 3 on the FAFSA.
 - Non-filers, please provide copies of your W-2 forms and verification of any untaxed income.
 - A copy of your marriage license (or certificate) if you are under 24 years of age and have applied as married and have no dependents.
 - Legal separation or divorce documents if you applied as "separated" or "divorced" or you applied with your parents as "separated" or "divorced".
 - If you are unmarried, under 24 years of age, and applied as a veteran, submit a copy of your DD214.

Note: Certain circumstances may require additional documentation, such as: name change, social security number conflict, selective service registration, citizenship verification, orphan or ward of the court, etc.

C. PERSONAL REFERENCES: *Information cannot be the same as student's*

EMERGENCY CONTACT

Name _____ Address _____ Relationship _____
City _____ State _____ Zip _____ Phone # _____

D. HIGHER EDUCATION: List all schools you have enrolled in since high school. *You can only receive grant aid at one school at a time. You must notify the financial aid office of your enrollment or planned enrollment at any other postsecondary institution. Failure to do so could lead to an overpayment of aid.*

NAME OF SCHOOL	CITY & STATE	FIRST & LAST DATES OF ENROLLMENT
_____	_____	_____
_____	_____	_____

E. PLEASE ANSWER ALL QUESTIONS.

1. Do you have a high school diploma or GED? (Please provide this office with a copy) No Yes
2. **Have you attended the DATC before?**..... No Yes
3. What program are you enrolling in? _____
4. What is your **anticipated** completion date from **DATC?** _____
5. Which of the following best describes your living situation while attending DATC? Living with Parent/s Own/Buying a home
 Renting Job Corp resident Living with others who provide me with room and board Live in military housing
6. In **addition** to the Pell Grant, would you also like to apply for: Work-Study Other Grants (SEOG, HESSP)

Student Name: _____

F. WHAT IS YOUR PLANNED ENROLLMENT STATUS FOR 2016-2017?

FT
24-30 hrs p/w

3/4T
18-23 hrs p/w

1/2T
12-17 hrs p/w

LTH*
1-11 hrs p/w

* Not eligible for financial aid

G. OTHER ASSISTANCE THAT YOU WILL RECEIVE IN THE 2016-2017 ACADEMIC YEAR (Fill in "\$0" if not applicable.)

1. Vocational Rehab-applied for..... No Yes
\$ _____ \$ _____ \$ _____
Tuition/fees per mo. Books per mo. Living Expenses

2. Workforce Services-applied for..... No Yes
\$ _____ \$ _____ \$ _____
Tuition/fees per mo. Books per mo. Living Expenses

3. Scholarships:

a. DATC Scholarship No Yes
\$ _____
Award Amount

b. Any other source..... No Yes
\$ _____ \$ _____ \$ _____
Tuition/fees per mo. Books per mo. Living Expenses

What Source? _____

4. Employer Tuition Assistance..... No Yes
\$ _____ \$ _____
Tuition/fees per mo. Books per mo.

Company name: _____

5. Veteran's Benefits..... No Yes
(Check all that apply)

Montgomery GI Bill (ch.30)..... \$ _____
Monthly Amount

Vietnam ERA GI Bill (ch.34/40)..... \$ _____
Monthly Amount

Voc. Rehab (ch.31).....
\$ _____ \$ _____ \$ _____
Tuition/Fees Books per mo. Monthly Amount

Utah National Guard Tuition Asst..... \$ _____
Monthly Amount

Active Duty Military Tuition Asst.....
\$ _____ \$ _____ \$ _____
Tuition/Fees Books per mo. Monthly Amount

Other (describe): _____
\$ _____
Monthly Amount

Post 911 GI Bill (ch.33) \$ _____
Monthly Amount

H. AUTHORIZATION AND SATISFACTORY PROGRESS AGREEMENT

I affirm that, to the best of my knowledge:

1. I do not owe an overpayment on a Title IV Federal Grant, including Pell, SEOG, LEAP, HEA Grant, or any other Student Aid Program grant at any institution.
2. I am not in default on a Title IV Federal Loan, including GSL, SLS, Plus, Federally Insured Student Loan (FFEL, NDSL, or Perkins Loan), at any institution.
3. I am not using or planning to use Federal Pell Grant from more than one college for the same period of time.
4. I am also aware that in order to continue to receive assistance from any Title IV program, I must maintain satisfactory progress and attendance in the course of study I am pursuing according to the DATC financial aid satisfactory progress policy. I authorize the release and exchange of information between the DATC and any agency providing me with financial assistance. I also understand that I must report any changes in information listed on this form. I hereby certify that all the information set forth by me on this application is correct to the best of my knowledge and agree that any or all information may be verified by the DATC. I understand that falsification is cause for appropriate legal and/or disciplinary action.

The student must sign this form!

Student Certification and Signature

By signing this form, I certify that all the information reported to qualify for federal student aid is complete and correct. If you purposely give false or misleading information, you may be fined, sent to prison, or both. If the information provided is not accurate on the FAFSA application, I authorize the financial aid office to make the correction.

Student Signature

Date