John A. Logan College
Logan College Road
Carterville, IL 62918
Phone 618-985-3741 Fax 618-985-9751 ***2009-2010***

Financial Aid Institutional Form

This form must be completed and returned to John A. Logan College, Financial Aid Office, 700 Logan College Road, Carterville, Illinois, 62918, before any aid will be awarded for the 2009-2010 academic year.

WARNING: You must fill out **all** forms accurately. If you get federal student aid based on incorrect information, you will have to pay it back. You may also have to pay fines and fees. If you purposely give false or misleading information, you may be subject to a $20,000 fine, receive prison sentence or both.

1. Name: _____
   Last First MI Maiden

2. Local Address*: _____
   Street City State Zip

   **** Students must keep their local address current with the Admissions Office in order for all correspondence and refunds to be mailed to the proper address.***

3. Student ID#: _____ Telephone Number: _____

4. Have you attended a college, university, or post-secondary school other than John A. Logan College?
   ❑ Yes ❑ No

   If yes, list all institutions you have attended: ***Must submit <u>all official</u> transcripts to Admissions in order to receive financial aid.***

   Name of College or University, City and State ***Attended (From - To)***

   _____
   _____
   _____

5. Financial Aid Release ***(Please initial each item)***:

   _____ I authorize John A. Logan College to use my financial aid funds (up to $200) to be applied to any previous balances and other charges to my account.

   _____ I have been given the 2009-2010 Financial Aid Booklet and the 2009-2010 Financial Aid Dates. I realize it is my responsibility to read these forms and watch for appropriate deadlines and disbursement dates.

   _____ I understand that I can only receive financial assistance if I am enrolled in an eligible degree/certificate program and the courses I am taking are **<u>required</u>** for that degree/program. Courses that I enroll in that are not in my current degree/program will **<u>not</u>** be considered in my financial aid award.

   _____ I understand that if I enroll in any late-block classes, that my Pell refund for those class(es) may be delayed until after the add/drop period has ended for late-block courses.

   _____ I understand that my financial aid information cannot be released to anyone but myself due to the Student Privacy Act (FERPA).

   ❑ I give permission to JALC to discuss my financial aid with my parent(s). Yes _____ No _____

   ❑ I give my permission to JALC to discuss my financial aid with my spouse (if applicable). Yes _____ No _____

   _____
   Student's Signature Date