# Fall 2013, Spring 2014, Summer 2014
## FINANCIAL AID APPLICATION
## GRADUATE—MTEC

LAKELAND COLLEGE

**Social Security No.** _____

Name_____
Last First MI Maiden

Address _____

City/State/Zip _____

Telephone: Home (_____)_____ Business (_____)_____

Cell Phone (_____)_____ Fax (_____)_____

E-Mail _____Date of Birth_____

Ethnic Background (*Optional)*: __American Indian/Alaskan Native __Asian/Pacific Islander __Black, non-Hispanic
__Hispanic __Hmong __Laotian __Vietnamese __White, non-Hispanic

1. Expected Graduation Date: _____

2. Term accepted into program_____

3. ____First time applying for aid at Lakeland ____Previously applied for aid at Lakeland

4. You will be applying for financial aid for which of the following terms:

_____ ***Fall 2013*** _____ ***Spring 2014*** _____ ***Summer 2014***

5. A **FERPA** release form (**optional**) is located on the reverse side of this application.

**List all colleges and/or universities attended**:

Name of Institution Date Attended Date of Degree
_____
_____
_____

**During the 2013-2014 academic year, I will you receive money from any of the following sources?**
___YES (check all that apply) ___NO

___Employee Reimbursement …….$_____/year
___Vocational Rehabilitation (DVR)...$_____/term
___Tribal Grant……...$_____/term
___T.E.A.C.H……...$_____/term
___TRA……$_____/term
___TIA……$_____/term
___Veteran Benefits/GI Bill Chap. 30.$_____/month
___Military Tuition Reimbursement .....$_____/year
___Non-veteran Military Benefits …….$_____/term
___AmeriCorps Awards……$_____/year
___Private Scholarship(s) ……..$_____/year
___WI Higher Education Aids
Board Teacher Loan……...$_____/year
_____number of months

**RETURN THIS FORM TO: Lakeland College, Financial Aid, PO Box 359, Sheboygan, WI 53082-0359**
**or FAX TO: 920-565-1470**
**Financial Aid Website: www.lakeland.edu/finaid/graduate.asp**