



SOUTHWESTERN OREGON COMMUNITY COLLEGE

FINANCIAL AID OFFICE

1988 NEWMARK ♦ COOS BAY OR 97420-2912 ♦ (541) 888-7337 ♦ 1-800-962-2838 ext. 7337

[www.socc.edu/serv\\_resrc/faweb2](http://www.socc.edu/serv_resrc/faweb2)

SUPPLEMENTAL FINANCIAL AID INFORMATION 2008-2009

Name: \_\_\_\_\_ Soc. Sec. No: \_\_\_\_\_

Address: \_\_\_\_\_

Street City State Zip Code

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

- List ALL schools and colleges attended since high school (including Southwestern). Do not include schools you attended only for GED or military training. If you have not attended any school since high school, write "NONE."

<p><b>*** If you have attended another college you must have official grade transcripts sent to Southwestern ***</b></p>	<p><b>*** If you have already received an Associates or Bachelor's Degree, you will need to contact our office for an appeal process ***</b></p>
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Names of Schools or Colleges, City, State	Approximate Dates Attended	Major/ Degree Goal	Degree Earned?	Previous Aid?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- Returning Financial Aid Students may skip this question and go directly to Question 3.

Do you or will you have a:

**High School Diploma?**     Yes     No

**GED?**     Yes     No

**Modified Diploma?**     Yes     No

Are/were you:    **Home Schooled?**     Yes     No

If you have not achieved any of the above or you have a modified diploma, you must show the ability to benefit before you will be eligible to receive aid (aid is not retroactive) by passing the appropriate placement test -- please ask about this test immediately.

Please complete the reverse of this form and sign and date →

3. During the 2008-2009 school year, will you be receiving benefits from an agency, such as TRA, Voc. Rehab., Veteran Admin., WIA, SCBEC, etc., or receiving any scholarships or other funds for educational purposes? **You must notify us if this information changes during the academic year.**

- Yes, I will be receiving agency benefits or a scholarship:  
Name of Agency/Scholarship: \_\_\_\_\_  
Amount per month **OR** term (circle one):      \$ \_\_\_\_\_
- No, I will not be receiving agency benefits or scholarships.

4. I will be attending classes at the following locations ( ✓ check option):

- Southwestern Main Campus - Coos Bay or online
- Southwestern Curry County Locations (Port Orford, Gold Beach, Brookings)
- On-line Courses through Other Colleges

5. Enrollment plans for 2008-2009:

School Term	Full Time (12+ credits)	3/4 Time (9-11 credits)	1/2 Time (6-8 credits)	1/4 Time (1-5 credits)	Not Enrolled
Summer term:	_____	_____	_____	_____	_____
Fall term:	_____	_____	_____	_____	_____
Winter term:	_____	_____	_____	_____	_____
Spring term:	_____	_____	_____	_____	_____

*The Family Education Rights and Privacy Act (FERPA) of 1974 is a federal law designed to protect the privacy of a student's education records. Educational records are considered confidential and will not be released without written consent from the student. In accordance with FERPA, it is necessary for Southwestern to obtain written consent from a student in order to release non-directory information.*

**I hereby grant Southwestern permission to release information regarding my student records to someone (*other than myself*) listed below:**

\_\_\_\_\_  
 (Authorized Person's Name - *please print*)      Relation      (Authorized Person's Phone #)

### SATISFACTORY ACADEMIC PROGRESS GUIDELINES

**I CERTIFY THAT:** *I will adhere to the Satisfactory Academic Progress guidelines as established by Southwestern Oregon Community College. I will read all available information provided to me in which the guidelines are fully explained. I understand an appeal process has been established should my aid be withheld (see the Satisfactory Academic Progress guidelines located on Southwestern's website: [www.socc.edu](http://www.socc.edu)).*

**Academic Period Covered:** July 1, 2008 to June 30, 2009 (Summer Term 2008-Spring Term 2009)

**I certify that all the information provided here is complete and correct.**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**