



1997-98 Student Aid Report (SAR) Federal Student Aid Programs Part 1 - Information Summary

OMB No. 1840-0132
Form Approved
Exp. 12/31/98

555-99-0010
GR-01 PIN: 5990

IMPORTANT: Read **ALL** information in Part 1 to find out what to do with this Report.

000,015C002

HAROLD GRANTHAM
ESTTAX 248265 TAXDESC
HERMOSILLO MD 20816

Page 1 of 4

January 13, 1997

EFC: 00000*C

BA DEG REC'D

Read this letter carefully and review each item on Part 2 of this Student Aid Report (SAR). Follow the instructions at the top of Part 2 and in the Free Application for Federal Student Aid (FAFSA) instruction booklet to help you make corrections. For additional help with your SAR, contact your Financial Aid Administrator (FAA).

You reported in Item 32 that you were an undergraduate student. This conflicts with the information you reported in Items 19 and/or 42.

Based on the information you provided on your application, we had to assume certain information to calculate your eligibility for Federal student aid. We printed the assumption we made and the word "assumed" in the "You told us" column for each of these items. If these assumptions are correct, do not change them.

Be sure to review the items in boldface type on Part 2 of your SAR and make any corrections if necessary.

Your application has been selected for review in a process called verification. You must submit to your school signed copies of certain 1996 financial documents for you and your parents. Contact your FAA to find out which documents are required.

Because of processing problems, we were unable to determine from the Social Security Administration if the social security number you reported on your application belongs to you. To receive Federal student aid, you must provide current proof to your FAA that the social security number in Item 8 is yours.

Because of processing problems we were unable to conduct a match to verify your registration status with Selective Service. If you are female or were born before 1960, disregard this comment. Otherwise, a male who is required to register with Selective Service must verify he is registered before aid can be disbursed. If you are registered, you will receive a letter of confirmation from the Selective Service within two weeks. If you are not registered, are male, and are 18 through 25 years of age, you must either check the "Yes" box for Item 105 on Part 2 of your SAR, or obtain and complete a Selective Service Registration form, available at your local post office. If you believe you are registered and do not receive a letter of confirmation, or are exempt, contact Selective Service at 847-688-6888.

Our records indicate that you are in DEFAULT on a Federal student loan. You are not eligible to receive any Federal student aid until your account has been resolved.

(letter continued on next page)

This section contains information from your student aid application (shaded items display parents' information, if provided). Use the Information Review Form (Part 2 of your SAR) to correct this information. Do not make corrections on this page.

1. LAST NAME	GRANTHAM
2. FIRST NAME	HAROLD
3. MIDDLE INITIAL	
4. PERMANENT STREET ADDRESS	ESTTAX 248265 TAXDESC
5. CITY	HERMOSILLO
6. STATE ABBREVIATION	MD
7. ZIP CODE	20816
8. SOCIAL SECURITY NUMBER	555-99-0010
9. DATE OF BIRTH	OCTOBER 10, 1975
10. PERMANENT HOME PHONE NUMBER	(BLANK)
11. STATE OF LEGAL RESIDENCE ABBREVIATION	MD
12. DATE YOU BECAME A LEGAL RESIDENT	JANUARY 01, 1990
13. DRIVER'S LICENSE STATE ABBREVIATION	
14. DRIVER'S LICENSE NUMBER	TAXABLE INC 16551
15. CITIZENSHIP STATUS	U.S. CITIZEN
16. ALIEN REGISTRATION NUMBER	
17. MARITAL STATUS	UNMARRIED
18. DATE OF MARITAL STATUS	(BLANK)
19. FIRST BACHELOR'S DEGREE BY 7-1-1997?	YES
20. HIGH SCHOOL GRADUATION DATE	(BLANK)
21. GED DIPLOMA DATE	(BLANK)
22. FATHER'S EDUCATIONAL LEVEL	(BLANK)
23. MOTHER'S EDUCATIONAL LEVEL	(BLANK)
24. ENROLLMENT STATUS SUMMER TERM 1997	(BLANK)
25. ENROLLMENT STATUS FALL SEM/QTR 1997	(BLANK)
26. ENROLLMENT STATUS WINTER QTR 1997-98	(BLANK)
27. ENROLLMENT STATUS SPRING SEM/QTR 1998	(BLANK)
28. ENROLLMENT STATUS SUMMER TERM 1998	(BLANK)
29. COURSE OF STUDY	(BLANK)
30. TYPE OF DEGREE/CERTIFICATE	(BLANK)
31. DATE EXPECT TO RECEIVE DEGREE	(BLANK)

56. U.S. INCOME TAX PAID	\$	1,251
57. STUDENT'S INCOME EARNED FROM WORK	\$	0
58. SPOUSE'S INCOME EARNED FROM WORK	\$	0
59. EARNED INCOME CREDIT	\$	0
60. ANNUAL SOCIAL SECURITY BENEFITS	\$	0
61. ANNUAL AFDC/ADC	\$	0
62. ANNUAL CHILD SUPPORT RECEIVED	\$	0
63. OTHER UNTAXED INCOME	\$	0
64. 1996 AMOUNT FROM LINE 5, WORKSHEET #3	\$	0
65. TYPE OF 1996 TAX FORM USED	COMPLETED 1040A/EZ/TEL	
66. EXEMPTIONS CLAIMED	01	
67. ADJUSTED GROSS INCOME FROM IRS FORM	\$	5,001
68. U.S. INCOME TAX PAID	\$	24
69. FATHER'S INCOME EARNED FROM WORK	\$	0
70. MOTHER'S INCOME EARNED FROM WORK	\$	2,000
71. EARNED INCOME CREDIT	\$	0
72. ANNUAL SOCIAL SECURITY BENEFITS	\$	0
73. ANNUAL AFDC/ADC	\$	0
74. ANNUAL CHILD SUPPORT RECEIVED	\$	0
75. OTHER UNTAXED INCOME	\$	0
76. 1996 AMOUNT FROM LINE 5, WORKSHEET #3	\$	0
77. CASH, SAVINGS, AND CHECKING	\$	25,001
78. OTHER REAL ESTATE/INVESTMENT VALUE	\$	
79. OTHER REAL ESTATE/INVESTMENT DEBT	\$	0
80. BUSINESS VALUE	\$	
81. BUSINESS DEBT	\$	0
82. INVESTMENT FARM VALUE	\$	0
83. INVESTMENT FARM DEBT	\$	0
84. AGE OF OLDER PARENT	50	
85. CASH, SAVINGS, AND CHECKING	\$	1,000
86. OTHER REAL ESTATE/INVESTMENT VALUE	\$	0



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555-99-0010
GR-01 PIN: 5990

IMPORTANT: Read ALL information in Part 1 to find out what to do with this Report.

(letter continued)

To resolve your defaulted Federal student loan, call the U.S. Department of Education

at 1-800-621-3115, or write to the U.S. Department of Education, P.O. Box 2287, Atlanta, Georgia 30370-2287.

To resolve your defaulted Federal student loan, call the U.S. Department of Education at 1-800-621-3115, or write to the U.S. Department of Education, P.O. Box 8422, Chicago, Illinois 60680-8422.

Contact the following agency(ies) regarding your defaulted Federal student loan:

Alabama Guaranteed Student Loan Program, Collections, 1-800-928-8926 or 502-564-5884

FAA INFORMATION

Agency Source: 7
MDE Record Type:
Record Type:
Verification Type: 20
Verification Flag: 20
Pell Digit: 9

Model: D
Duplicate Copy:
SysGen:
Dependency Override:
Special Handling:
Reprocessing Code:

FAA Adjustment Flag:
Reject Reasons:
Application Receipt Date: 08/21/1997
Transaction Receipt Date: 08/21/1997
Subsequent Application Flag:
Early Analysis Flag:

MONTHS: 1 2 3 4 5 6 7 8 9 10 11 12
PRIMARY EFC: 00000

Part 1 - Information Summary NSLDS FINANCIAL AID HISTORY

Processed: 01-13-97

Overpayment:
 Pell: N
 FSEOG: N
 Perkins: N

Defaulted Loans: Y

Active Bankruptcy: Y

Aggregate Amount for FFELP/Direct Loans:

Subsidized Loans: Outstanding Principal Bal.	\$ 1,020	Pending Disbursements \$	Total \$ 1,020
Unsubsidized Loans: Outstanding Principal Bal.	\$ 1,809	Pending Disbursements \$	Total \$ 1,809
Consolidated Loans: Outstanding Principal Bal.	\$	Pending Disbursements \$	Total \$

Perkins Loans:

Cumulative Loan Amount \$ 1,310 Current Year Loan Amount \$ 0

First Disbursement Prior to 10/1/92: Y

Expanded Loan Flag Option: Y

Most Recent FFELP/Direct Loans:

	Loan Amount	Loan Begin Date	Loan End Date	GA Code	School Code	Current Holder	Region Code
Direct Stafford	\$1,111	01/01/96	01/01/97		00132100	000100	

Outstanding Bal. \$ 911 as of 02/01/96

Stafford	\$1,001	09/01/91	06/01/92	701	00132500	000701
Status Code DL as of 01/01/96						
Outstanding Bal. \$ 109 as of 01/01/96						

Supplemental Loan (SLS)	\$916	09/01/87	06/01/88	701	00132100	000701
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Outstanding Bal. \$ 0 as of 02/02/94

Stafford Unsubsidized	\$1,004			555	00132100	000555	04
Status Code DU as of 01/04/95							
Outstanding Bal. \$ 904 as of 01/04/96							

Direct Stafford Unsubsidized	\$1,005			555	00132500	000555	05
Status Code DW as of 01/05/95							
Outstanding Bal. \$ 905 as of 01/05/96							

Defaulted Loans:

	Loan Amount	Loan Begin Date	Loan End Date	GA Code	School Code	Current Holder	Region Code
Supplemental Loan (SLS)	\$916	09/01/87	06/01/88	701	00132100	000701	
Status Code DD as of 05/01/96							
Outstanding Bal. \$ 0 as of 02/02/94							
Direct Stafford	\$1,111	01/01/96	01/01/97		00132100	000100	
Status Code DT as of 09/01/96							
Outstanding Bal. \$ 911 as of 02/01/96							
Direct Stafford Unsubsidized	\$1,005			555	00132500	000555	05
Status Code DW as of 01/05/95							
Outstanding Bal. \$ 905 as of 01/05/96							

1997-98 Student Aid Report Federal Student Aid Programs Part 2 - Information Review Form

OMB No. 1840-0132
Form Approved
EXP. 12/31/98

Processed: 01-13-97
EFC: 00000*C
BA DEG REC'D

- Pay special attention to any items in **BOLDFACE TYPE**; they may need to be corrected.
- To correct an item, print the correct answer in the boxes to the right of the item in question.
- To delete an answer in the "You Told Us" column, draw a line through the boxes to the right of the item.
- Use the code information on the Instructions and Codes page if you need to correct items 29 and/or 30.
- If you make corrections, send BOTH pages of Part 2 to the address on the last page of Part 2.
Do not attach tax or any other forms.
- If you need to correct an item that contains an oval completely fill in the oval as follows: .
Do not or ovals. Erase or white-out mistakes completely.

555-99-0010
GR-01 PIN: 5990

Section A: You (the Student)

YOU TOLD US	WRITE IN ONLY NEW OR CORRECTED INFORMATION.
1. Last Name GRANTHAM	
2. First Name HAROLD	3. Middle Initial
4. Permanent Street Address ESTTAX 248265 TAXDESC	
5. City HERMOSILLO	
6. State Abbreviation MD	7. ZIP Code 20816
8. Social Security Number 555-99-0010	
9. Date of Birth OCTOBER 10, 1975	Use MM-DD-CCYY format (e.g., 05-01-1979)
10. Permanent Home Phone Number (BLANK)	
11. State of Legal Residence Abbreviation MD	12. Date You Became a Legal Resident JANUARY 01, 1990
13. Driver's License State Abbreviation	
14. Driver's License Number TAXABLE INC 16551	
15. Citizenship Status U.S. CITIZEN	U.S. Citizen <input type="radio"/> 1 Eligible Non-Citizen <input type="radio"/> 2 Neither <input type="radio"/> 3
16. Alien Registration Number	A
17. Marital Status UNMARRIED	Single, Widowed or Divorced <input type="radio"/> 1 Married <input type="radio"/> 2 Separated <input type="radio"/> 3
18. Date of Marital Status (BLANK)	Use MM-CCYY format (e.g., 05-1996)
19. First Bachelor's Degree by 7-1-1997? YES	Yes <input type="radio"/> 1 No <input type="radio"/> 2

Section B: Education Background

20. High School Graduation Date (BLANK)	19	20-21. Enter only one date.
21. GED Diploma Date (BLANK)	19	
22. Father's Educational Level (BLANK)	Elementary (K-8) <input type="radio"/> 1 High School (9-12) <input type="radio"/> 2 College or beyond <input type="radio"/> 3 Unknown <input type="radio"/> 4	
23. Mother's Educational Level (BLANK)	Elementary (K-8) <input type="radio"/> 1 High School (9-12) <input type="radio"/> 2 College or beyond <input type="radio"/> 3 Unknown <input type="radio"/> 4	

**Section F: 1996 Income,
Earnings and Benefits**

Codes for Types of 1996 Tax Form Used (Items 53 and 65):
A - completed 1996 1040A, 1040EZ, or 1040TEL D - estimated 1996 1040
B - completed 1996 1040 E - will not file 1996 U.S. Income Tax Return
C - estimated 1996 1040A, 1040EZ, or 1040TEL

STUDENT (and Spouse)

PARENT(S)

[The remainder of the page is heavily obscured by horizontal black bars, rendering the content illegible.]

1997-98 Student Aid Report Federal Student Aid Programs Part 2 - Information Request Form

OMB No. 1840-0132
Form Approved
EXP. 12/31/98

Processed: 01-07-97

- You must respond to ALL items in **BOLDFACE TYPE** before we can process your form.
- Look for arrows → in the area next to your reported data. Your answer was unacceptable or needs to be verified for these items.
 - Give us a new answer in the boxes that appear to the right of the arrow. **OR**
 - If you need to verify the data you reported is correct, re-enter the same value in the boxes that appear to the right of the arrow.
- To delete an answer in the "You told us" column, draw a line through the boxes to the right of the item.
- Use the code information on the Instructions and Codes page if you need to correct items 29 and/or 30.
- Send **BOTH** pages of Part 2 to the address on the last page of Part 2. **Do not attach tax or any other forms.**
- If you need to correct an item that contains an oval ○ completely fill in the oval as follows: ●. Do not ⊗ or ⊘ ovals. Erase or white-out mistakes completely.

600-01-0053
FR-01 PIN: 1998

Action A: You (the Student)

YOU TOLD US	WRITE IN ONLY NEW OR CORRECTED INFORMATION.
1. Last Name FRANKLIN	
2. First Name DAVID	3. Middle Initial
4. Permanent Street Address 1107 LOU-ANN DRIVE	
5. City DALLAS#	
6. State Abbreviation CN	7. ZIP Code 00000
8. Social Security Number 600-01-0053	
9. Date of Birth MAY 17, 1966	Use MM-DD-CCYY format (e.g., 05-01-1979)
10. Permanent Home Phone Number (BLANK)	
11. State of Legal Residence Abbreviation	12. Date You Became a Legal Resident JANUARY 28, 1970
13. Driver's License State Abbreviation	
14. Driver's License Number 123568998	
15. Citizenship Status (BLANK)	U.S. Citizen ○ 1 Eligible Non-Citizen ○ 2 Neither ○ 3
16. Alien Registration Number	A
17. Marital Status MARRIED	Single, Widowed or Divorced ○ 1 Married ○ 2 Separated ○ 3
18. Date of Marital Status (BLANK)	Use MM-CCYY format (e.g., 05-1996)
19. First Bachelor's Degree by 7-1-1997? NO	Yes ○ 1 No ○ 2

Action B: Education Background

20. High School Graduation Date (BLANK)	19	20-21. Enter only one date.
OR		
21. GED Diploma Date (BLANK)	19	
22. Father's Educational Level	Elementary (K-8) ○ 1 High School (9-12) ○ 2 College or beyond ○ 3 Unknown ○ 4	

**Section H:
Releases
and Signatures**

Housing Codes: 1 -- on-Campus 3 -- with parent(s)
2 -- off-Campus 4 -- with relative(s) other than parent(s)

92. First College Name, City and State		Enter Code From Above 93. Housing Code	<input type="text"/>
94. Second College Name, City and State		95. Housing Code	<input type="text"/>
96. Third College Name, City and State		97. Housing Code	<input type="text"/>
98. Fourth College Name, City and State		99. Housing Code	<input type="text"/>
100. Fifth College Name, City and State		101. Housing Code	<input type="text"/>
102. Sixth College Name, City and State		103. Housing Code	<input type="text"/>
104. Should Data Be Released To State? YES	Yes <input type="radio"/> 1 No <input type="radio"/> 2		
105. Register You For Selective Service? (BLANK)	Yes <input type="radio"/> 1		
106. Signed By? STUDENT	DO NOT CORRECT		
107. Date Completed OCTOBER 28, 1997	DO NOT CORRECT		
108. Preparer's EIN (BLANK)	<input type="text"/>		
109. Preparer's Social Security Number (BLANK)	<input type="text"/>		
110. Preparer's Signature (BLANK)	<input type="text"/>		

APPLICATION RECEIPT DATE:: 01/04/97

SEND BOTH PAGES OF THIS FORM TO:
Federal Student Aid Programs
P.O. Box 60008
East Saint Louis, IL 62206-6008

You must read this Certification and sign below.

CERTIFICATION
All of the information on this SAR is true and complete to the best of my knowledge. If I am asked, I agree to give proof that my information is correct. This proof might include a copy of the 1996 U.S. Income Tax Form filed by me or my family. I understand that if I purposely give false or misleading information on this SAR, I may be subject to a \$10,000 fine, a prison sentence, or both.

Everyone whose information is given on this form should sign below. The student (and at least one parent, if parental information is given) must sign below or this form will be returned unprocessed.

1 Student	Date
2 Student's Spouse	Date
3 Father/Stepfather	Date
4 Mother/Stepmother	Date

School Use Only

Professional Judgment
D/O 1 2

Title IV Code

1 FAA Signature

MDE Use Only

DE Special Handle

**Section H:
Releases
and Signatures**

Housing Codes: 1 -- on-Campus 3 -- with parent(s)
2 -- off-Campus 4 -- with relative(s) other than parent(s)

Enter Code From Above

92. First College Name, City and State UNIVERSITY OF MARYLAND COLLEGE PARK COLLEGE PARK, MARYLAND	
94. Second College Name, City and State LOYOLA COLLEGE BALTIMORE, MARYLAND	
96. Third College Name, City and State	
98. Fourth College Name, City and State	
100. Fifth College Name, City and State	
102. Sixth College Name, City and State	
104. Should Data Be Released To State? YES	Yes <input type="radio"/> 1 No <input type="radio"/> 2
105. Register You For Selective Service? (BLANK)	Yes <input type="radio"/> 1
106. Signed By? BOTH	DO NOT CORRECT
107. Date Completed FEBRUARY 15, 1997	DO NOT CORRECT
108. Preparer's EIN (BLANK)	<input type="text"/> <input type="text"/> - <input type="text"/>
109. Preparer's Social Security Number 234-76-7890	<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
110. Preparer's Signature SIGNED	<input type="text"/>

93. Housing Code WITH RELATIVE(S)	<input type="text"/>
95. Housing Code ON-CAMPUS	<input type="text"/>
97. Housing Code (BLANK)	<input type="text"/>
99. Housing Code (BLANK)	<input type="text"/>
101. Housing Code (BLANK)	<input type="text"/>
103. Housing Code (BLANK)	<input type="text"/>

SEND BOTH PAGES OF THIS FORM TO:

Federal Student Aid Programs
P.O. Box 7023
Lawrence, KS 66044-7023

You must read this Certification and sign below.

CERTIFICATION
All of the information on this SAR is true and complete to the best of my knowledge. If I am asked, I agree to give proof that my information is correct. This proof might include a copy of the 1996 U.S. Income Tax Form filed by me or my family. I understand that if I purposely give false or misleading information on this SAR, I may be subject to a \$10,000 fine, a prison sentence, or both.

Statement of Educational Purpose
I certify that I will use any Federal Title IV, HEA funds I receive during the award year covered by this application solely for expenses related to my attendance at the institution of higher education that determined or certified my eligibility for those funds.

Certification Statement on Overpayments and Defaults
I understand that I may not receive any Federal Title IV, HEA funds if I owe an overpayment on any Title IV educational grant or loan or am in default on a Title IV educational loan unless I have made satisfactory arrangements to repay

School Use Only	REJECT 16
Professional Judgment	
D/O	1 <input type="radio"/> 2 <input type="radio"/>
Title IV Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

INSTRUCTIONS AND CODES

HELPFUL HINTS:

Read all the comments on Part 1 of your SAR. They will help you to correct any information we had questions about when we processed your financial aid application. Review ALL the items on Part 2 of your SAR to make sure that the information is correct. Follow the instructions at the top of Part 2 and in the comments on Part 1 of your SAR.

If you do not know how to answer a question, want further assistance correcting your SAR, or do not understand what to do, refer to an application instruction booklet. Otherwise, contact the financial aid office at the school you plan to attend.

If you need to make corrections or respond to boldface items, contact your financial aid office to determine if your school can submit these corrections electronically. Electronic processing is faster.

Do not send any documentation (including tax forms) to the address next to the certification. This documentation will be discarded. If your financial aid administrator (FAA) requests documentation, send it with your SAR to the financial aid office.

1996 Other Untaxed Income and Benefits (questions 63 and 75): you should include any untaxed income and benefits not

reported elsewhere on the application. Some examples are deductible IRA and/or Keogh payments, and tax-deferred pension and savings plans. (See application instruction booklet, Worksheet #2, page 11.)

1996 Amount from Line 5, Worksheet #3 (questions 64 and 76): you should include portions of grants and scholarships reported on your tax return; earnings from Federal Work-Study or need-based work programs; National and Community Service Trust Act allowances and benefits; and child support paid. (See application instruction booklet, Worksheet #3, page 12.)

CODES FOR QUESTION 29: COURSE OF STUDY

- | | |
|---|--|
| 01 Agriculture | 17 Mathematics (includes statistics) |
| 02 Architecture | 18 Nursing |
| 03 Biological sciences (biology, zoology, etc.) | 19 Personal and miscellaneous services (cosmetology, culinary arts, massage, etc.) |
| 04 Business management and administrative services (mktg., mgmt., bkcp., acct., etc.) | 20 Philosophy |
| 05 Communications (journalism, advertising, etc.) | 21 Physical sciences (chemistry, physics, geology, etc.) |
| 06 Computer sciences | 22 Social sciences and history (includes economics, geography, political science) |
| 07 Education | 23 Psychology |
| 08 Engineering | 24 Theological studies and religious vocations |
| 09 English language/literature | 25 Vocational/technical (construction, mechanical, transportation, etc.) |
| 10 Fine and performing arts | 26 Wildlife, forestry, or marine sciences |
| 11 Foreign languages/literatures | 27 Other/undecided |
| 12 Health profession (except nursing) | |
| 13 Home economics | |
| 14 Law | |
| 15 Liberal Arts | |
| 16 Library sciences | |

FOR YOUR INFORMATION:

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0132. The time required to complete this information collection is estimated to average 15 to 30 minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Application and Pell Processing Systems Division, U.S. Department of Education, 600 Independence Avenue, SW, Washington, DC 20202-5453.

By answering questions 92 through 103, and signing the Free Application for Federal Student Aid, you gave permission to the U.S. Department of Education to provide information from your application to the college(s) listed in Section H. You also agreed that such information is deemed to incorporate by reference the Statement of Educational Purpose on page 4 of the financial aid application.

WARNING: As more fully set forth in Section 5301 of the Anti-Drug Abuse Act of 1988, if you are convicted of drug distribution or possession, your eligibility for Title IV student financial aid is subject to suspension or termination.

If you are borrowing under the FFEL or the William D. Ford Federal Direct Loan Program, contact your financial aid administrator to find out about limits on the amount you may borrow each academic year.

CODES FOR QUESTION 30: TYPE OF DEGREE/CERTIFICATE:

- 1 Certificate or diploma for completing an occupational, technical, or educational program (less than two-year program)
- 2 Certificate or diploma for completing an occupational, technical, or educational program (at least two-year program)
- 3 Associate degree (at least two-year degree)
- 4 1st Bachelor's degree
- 5 2nd Bachelor's degree
- 6 Teaching credential program (non-degree program)
- 7 Graduate or professional degree
- 8 Other/undecided

If you (and your family) have unusual circumstances, such as tuition expenses at an elementary or secondary school, unusual medical or dental expenses not covered by insurance, a family member who recently became unemployed, or changes in income or assets that affect your eligibility for financial aid, complete this form and then check with your college financial aid office.



Information Acknowledgement 1997-98 Student Aid Report (SAR) Federal Student Aid Programs

OMB No. 1840-0132
Form Approved
Exp. 12/31/98

238-02-0003
T9-01 PIN: 4020

Do not use this form to make corrections. See your Financial Aid Administrator.

000009C002

January 07, 1997
EFC: 99999*C

F999999991 O. T9999999999999991
999999999999999999999999999991
9999999999999991 TN 99999

GRAD/PROF

We have processed your application for Federal student aid, or the correction that you submitted electronically through your school. On the back of this page we printed the information we received and a summary of the results of processing that information. We may have assumed certain information to calculate your eligibility for Federal student aid. We printed any assumptions we made and the word "assumed" for those items on the back of this page. Contact your Financial Aid Administrator (FAA) if:

- the assumptions we made are not correct,
- you need to make other corrections,
- we indicate below that we need more information to determine your eligibility,
- we indicate below you are selected for verification, or
- we indicate below you must work with your FAA to resolve some eligibility issues.

Based on the information you gave us, you are not eligible for a Federal Pell Grant. However, you may be eligible for other types of aid.

Your application has been selected for review in a process called verification. You must submit to your school signed copies of certain 1996 documents.

You must work with your FAA to resolve some issues before the FAA can determine if you are eligible to receive Federal financial aid.

