

Summer 2019 Financial Aid Application

Student's Last Name	First Name	MI	Student Identification Number
Student's Phone Number		Today's Date	

Will you have access to your Cobleskill email during the summer? yes no
 All communication about your summer financial aid will be sent to your Cobleskill email unless you don't have access to it and specify a different email address below:

Which semester(s) do you plan to enroll in 2019-2020? (*check all that apply*)

- Summer Fall Spring

1. During the summer I will be living: (*check one*)

- Home with Parents Off-Campus On-Campus

2. I plan to take _____ Cobleskill credits during the 2019 summer semester.

3. I want to apply for the following types of financial aid to help me cover my summer costs. (*check all that apply*)

- I understand that any Pell that I am eligible for will automatically be applied to my summer semester as long as I am enrolled in at least 3 credits.
- I want a Federal Direct Student Loan.
Minimum of 6 credits required.
- I have applied for TAP.
Full time (12 credits) are required.
- I plan to receive help from an external agency for summer (ACCESS/VR, VA etc.)
Attach statement as proof or have it sent directly by the agency.

Name of Agency: _____

- I have applied for a private alternative student loan.

Name of Lender: _____

- I have been awarded a SUNY Cobleskill scholarship for 2019-20 and would like to apply half to my summer semester (12 credits are required)

Student Signature: _____

Financial Aid Office Only: Processed By: _____ Date Processed: _____