

AID APPLICATION 2024-2025

Section A	of the credits	that you plan to take f	or oach son	postor and list the	om holow:	
_		that you plan to take f				
FALL: 12+						
		SPRING: 9-11				
		SPRING: 6-8				
		SPRING: 0-5				
						es outside of your program e-fall, Full Fall, Fall 1 and Fall
Term or Date yo	u expect you	federal financial aid to	begin:			
What is your ant	icipated grad	uation/completion date	for your cu	rrent program? _		
Housing Intentio	ns: (<i>mark one</i>	e): () On Campus () Off Camp	us, with Parent	() Off Campus	
Students transfe	rring to Ottaw	a, indicate the numbe	r of Semest	er Credits you ex	pect to transfer in	·
Current Program	n? (m <i>ark one</i>)	: () Undergrad ()	Grad () E	DBA ()Teache	er Cert () CAGS	3 () CEP Nursing
(i.e. employer re	imbursement	a scholarship or fundin outside scholarships, e and amount (attach	Voc Rehab	etc.)	not include Ottav	va University Funds.
Туре:		Amt \$	Ту	oe:		_ Amt \$
regardless of wh	ether you red	other school after JU eived financial aid) If r nce July 1, 2024	none, please	write "none"	·	/ith this information /20 to/20
DIRECT ST	UDENT L	OAN REQUES	Т			
		r or Financial Aid Ad		termine your eli	gibility for Direct	t Loans
		amount (total Subsidiz varded before Unsubsidiz		subsidized): \$		
I DO I	NOT want a F	ederal Direct Student	Loan			
Section C						
			niversity tha	t I am or may be	eligible to particip	oate in Federal Financial
I am o	opting out of F	ederal Financial Aid fo	or 2024-202	5		
enrollment. The enrollment	ollment action c	tiversity, a student makes a onstitutes a financial obliga s and constitute an education	tion between t	he student and Ottav	va University and all p	associated with that proceeds of this agreement
Printed Name: _			Signatur	re:		
Social Security N	Number:		IC) #:	Date:	