

COLLEGE OF
Saint Benedict  Saint John's
UNIVERSITY

2009-2010
Financial Aid Application

Priority Deadline March 15, 2009

Students who complete this application and the FAFSA by March 15 will receive notification of their financial aid eligibility before May 1.

APPLYING FOR NEED-BASED AID

To apply for need-based financial aid (grants, on-campus employment, student loans) for 2009-2010, students must complete two forms:

1. Free Application for Federal Student Aid (FAFSA)

The FAFSA is available online at www.fafsa.ed.gov. Students and parents may find it helpful to complete the *optional* FAFSA on the Web Worksheet available at www.fafsa.ed.gov before entering the data online. In order to make the process completely electronic, the student and at least one parent must apply for a PIN (Personal Identification Number). The PIN serves as the electronic signature for the FAFSA. You may apply for your PIN now at www.pin.ed.gov, or at the time you complete the online FAFSA.

2. CSB/SJU Financial Aid Application

The FAFSA and CSB/SJU Financial Aid Application should be completed as soon as possible after 2008 federal tax returns are completed. Priority consideration for financial aid is given to students who complete the FAFSA and Financial Aid Application by March 15.

FEDERAL SCHOOL CODES REQUIRED IN STEP 6 ON THE FAFSA

College of Saint Benedict (women) 002341

Saint John's University (men) 002379

SEND THIS COMPLETED FORM TO:

Women:

College of Saint Benedict
Financial Aid Office
37 S. College Avenue
St. Joseph, MN 56374-2099
(320) 363-5388
(800) 544-1489
Fax: (320) 363-6099
E-mail: csbfinaid@csbsju.edu

Men:

Saint John's University
Financial Aid Office
P.O. Box 5000
Collegeville, MN 56321-5000
(320) 363-3664
(800) 544-1489
Fax: (320) 363-3102
E-mail: sdirkes@csbsju.edu

More information
about financial aid
and scholarships
is available at
www.csbsju.edu.

Remember to include photocopies of your signed and dated federal tax returns and W-2s.

AWARD NOTIFICATION

CSB/SJU will notify applicants of their need-based eligibility starting in early March. Awards are done on a rolling basis as applications become complete. Allow five weeks from date of completing the FAFSA and CSB/SJU Financial Aid Application for a response from the college.

A. STUDENT INFORMATION

Name _____
Last First Middle Preferred first name

Date of birth _____ Social Security Number _____
Month/Day/Year

Home address _____ Telephone (_____) _____
Street/P.O. box

_____ *City State Zip County*

E-mail address _____ Cell phone (_____) _____

- Where do you plan to live? Residence Hall Home Other
- Did you or will you graduate from a Minnesota high school while residing in Minnesota? Yes No
- High school graduation date _____
- Did you or will you reside in Minnesota for 12 consecutive months before becoming a student at a Minnesota school beyond high school? Yes No
- Advanced Placement (AP) or International Baccalaureate (IB) tests taken? Yes No If yes, number of tests with score of 3 or higher _____
- Please list any scholarships you will receive for 2009-2010 from local or community agencies (do not include scholarships from CSB or SJU):
Name and amount _____ Renewable? Yes No
Name and amount _____ Renewable? Yes No
Veterans education benefits you will receive in 2009-2010 \$ _____ x _____ months. Chapter _____
- How many credits do you intend to take each semester? (Normal load is 16 credits each semester.) Fall _____ Spring _____
- What previous post-secondary institutions have you attended?
College _____ Date(s) attended _____
Post-secondary Enrollment Option (PSEO)? Yes No
College _____ Date(s) attended _____
Post-secondary Enrollment Option (PSEO)? Yes No
- Does your mother have a four-year bachelor's degree? Yes No Do not know
Does your father have a four-year bachelor's degree? Yes No Do not know

B. STUDENT'S TAX FORMS AND INCOME INFORMATION

- Tax filers:** If you did not keep a copy of the tax return, call 800-829-1040 to request a transcript from the Internal Revenue Service, or request a copy from your tax preparer. A request for transcript of tax return, Form 4506-T, is downloadable at www.irs.gov/pub/irs-pdf/f4506t.pdf.
- Check and submit a **signed** copy of your 2008 federal tax return and your W-2(s).
- Non-tax filers:** If you will not file and are not required to file a 2008 U.S. Income Tax Return, list your employer(s) and income received in 2008. Use W-2 form or other earnings statement and include a copy. Include spouse's if married.

Employer _____ \$ _____

Employer _____ \$ _____

- Check and submit a copy of your 2008 W-2(s).

C. FAMILY INFORMATION

List the people whom your parent(s) will support between July 1, 2009, and June 30, 2010.

Include:

- Yourself
- Your parent(s) or spouse, if married
- Your parent(s)' dependent children (if your parent(s) provide more than half their support or if they would be required to give parental information when applying for federal student aid)
- Your dependent children

Include other people as part of your family only if:

- They lived with your parent(s) and received more than half their support from your parent(s) at the time you completed your student aid application AND will continue to receive more than half their support from July 1, 2009, through June 30, 2010

(Note: Changes in this information during the 2009-2010 school year must be reported to the Financial Aid Office.)

Full name The information listed below MUST match corresponding family-size questions on the FAFSA. List only those included in the above description.	Age	Relationship to student (parent, spouse, child, sibling)	If this person will attend college at least half-time between 7/1/09 and 6/30/10, print college name and grade level; if this person will attend private elementary/secondary school during that time, print school name and the amount of tuition and fees paid by parents (tuition/fees less aid received).

Mother's/stepmother's employer _____

Father's/stepfather's employer _____

Occupation _____

Occupation _____

Work phone (_____) _____

Work phone (_____) _____

Cell phone (_____) _____

Cell phone (_____) _____

E-mail _____

E-mail _____

Number of years with employer _____

Number of years with employer _____

If necessary, may we contact you at your employer(s)? Yes No

D. PARENTS' TAX FORMS AND INCOME INFORMATION

- Tax filers:** If your parents did not keep a copy of their tax return, call 800-829-1040 to request a transcript from the Internal Revenue Service, or request a copy from their tax preparer. A request for transcript of tax return, Form 4506-T, is downloadable at www.irs.gov/pub/irs-pdf/f4506t.pdf.
 - Check and submit a **signed** copy of your parents' 2008 federal tax return (pages 1, 2 and schedules A, B, C, D, E, F and K-1 Form 1065, if applicable) and their W-2(s). **Please note, federal financial aid regulations require a signed tax return.**
- Non-tax filers:** If your parent(s) will not file and are not required to file a 2008 U.S. Income Tax Return, list their employer(s) and income received in 2008. Use W-2 form or other earnings statement and include a copy.

Employer _____ \$ _____

Employer _____ \$ _____

- Check and submit a copy of your 2008 W-2(s).

E. FINANCIAL DATA

Please list the amounts received in 2008; all blanks must be completed. List 0 if zero.

STUDENT'S UNTAXED INCOME:		PARENTS'/STEPPARENTS' UNTAXED INCOME:	
Child Support received in 2008	\$	Child Support received in 2008	\$
Expected for 2009	\$	Expected for 2009	\$
Untaxed pensions*	\$	Untaxed pensions*	\$
2008 payments to IRA, KEOGH, SEP or Simple Retirement Plans	\$	2008 payments to IRA, KEOGH, SEP or Simple Retirement Plans	\$
2008 payments to 401K or 403B (Box 12 on W-2)	\$	2008 payments to 401K or 403B (Box 12 on W-2)	\$
Workers' Compensation benefits	\$	Workers' Compensation benefits	\$
Other untaxed income	\$	Other untaxed income	\$
Please identify (e.g. Disability)		Please identify (e.g. Disability)	

*If any of the untaxed pension/IRA distribution listed on your federal return was a rollover, please indicate amount \$ _____

If parents own a small business, list the number of employees _____

If parents are divorced or separated, indicate the amount of financial help the noncustodial parent will provide for college \$ _____

Please explain any unusual expenses (\$ _____) or special circumstances and submit supporting documentation. Examples may include medical/dental expenses (not covered by insurance or employee flexible benefit/cafeteria program), child support payments, etc.

SIGN THIS WORKSHEET

Signing this worksheet certifies that all information reported is complete and correct. In accordance with federal regulations, if you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.

At least one parent must sign in addition to the dependent student.

Student's signature

Date

Spouse's signature

Date

Father's/stepfather's signature

Date

Mother's/stepmother's signature

Date

BE SURE TO INCLUDE

- Photocopies of your and your parents' signed and dated **federal** tax returns (not state returns)
- W-2(s)