



2008 – 2009 FINANCIAL AID APPLICATION  
**EASTERN NAZARENE COLLEGE**  
**ADULT STUDIES PROGRAM**

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Other Phone/Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male Female

U.S. Citizen? Yes No If "No", what is your Alien Registration # \_\_\_\_\_  
(attach copy of Alien Registration Card-front AND back side)

Please circle the program you are in or anticipating going into:  
AC ACJ BA BAM BCJ BSBA MSM PA

Employer Name and Address \_\_\_\_\_  
\_\_\_\_\_

Will you be receiving any tuition assistance from your employer? Yes No  
If "Yes", what is the dollar amount or percentage per course? \_\_\_\_\_  
What is the yearly maximum? \_\_\_\_\_

Please give us the name and address of a person who knows you personally. They must live at a different US address (no PO boxes can be used). This reference will be used for reference only in the case that we can not contact you at your phone or address.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Home Phone \_\_\_\_\_  
Relationship to You \_\_\_\_\_

By signing below, I am verifying that all the information provided is true and correct to the best of my knowledge. I agree to provide documentation, if asked by Eastern Nazarene College, for any item on my financial aid application that must be verified. I understand that falsification of information may be grounds for dismissal any time.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_