

# 2009-2010 FINANCIAL AID RENEWAL APPLICATION

PLEASE CHECK ONE:  DAY  EVENING

Fordham Identification Number: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_  

Last name
First name
M.I.

Expected graduation date: \_\_\_\_\_

Contact telephone number: Home: (\_\_\_\_) \_\_\_\_\_

Other: (\_\_\_\_) \_\_\_\_\_

## 2009-2010 3L & 4L

(complete this box)

Fordham aid will be offered on a preliminary basis dependent upon our office receiving a statement or final pay stub from your summer employer verifying the information you provide below. If you plan not to work this summer, please write in N/A and attach letter explaining your circumstance. Fordham aid may be reduced by summer earnings exceeding \$15,000 prior to your third (and fourth) year(s). The formula for this adjustment (per award) is:  $(\text{gross income minus } \$15,000) \times 0.6 \times 0.5$ .

### Student Prospective Employment

	Name of Employer	Position	No. of Weeks Employed	Weekly Gross Earnings
Summer 2009	_____	_____	_____	\$_____ .00
	_____	_____	_____	\$_____ .00
Acad. Yr. 2009-10	_____	_____	_____	\$_____ .00
	_____	_____	_____	\$_____ .00

**Office Use Only:**

	Grant Source #	Grant Amt	Loan
Merit Award: _____	08-09		
	09-10		

Reviewed by/Date: \_\_\_\_\_

