## **CONCORDIA UNIVERSITY**

OFFICE OF UNDERGRADUATE ADMISSION

7400 AUGUATA STREET, RIVER FOREST, ILLINOIS 60305-1499 708-209-3100

# **INTENT TO APPLY FOR FINANCIAL ASSISTANCE**

Interest in Financial Assistance (Please check all appropriate boxes and complete requested information.)

### I would like to be considered for merit scholarships. I do not intend to file a confidential need analysis.

### **Need-Based Financial Aid** (This includes merit awards as part of a financial assistance package.)

I would like to be considered for any form of assistance for which I may qualify. I understand that it is necessary to file the Free Application for Federal Student Aid (FAFSA) by April 15th in order to meet the priority award deadline of June 1.

#### Concordia Music Scholarships

I plan to audition for a Music Scholarship. As a result, I understand that I will not be notified of my scholarship until after the audition deadline.

□ I have a bachelor's degree and am seeking a second degree or certification. I am interested in educational loan programs.

<b>STUDENT INFORMATION</b> Miss Mr. Mr.		Today's Date _	
Last Name	First	Middle	Social Security Number
Home Street Address	City	State	Zip Code
PARENTAL INFORMAT Please check boxes which m Father's Full Name	ay apply to you: Parents	s Divorced Parent	
Home Street Address (If differe	nt from applicant's) City	State	Zip Code
Home Telephone Number (_	)	_ Work Telephone Numb	ber ()
Occupation and Employer			
Mother's Full Name			
Home Street Address (If differe	nt from applicant's) City	State	Zip Code
Home Telephone Number (_	)	_Work Telephone Numb	ber ()
Occupation and Employer			
	y be available to you throu action requested below. Th		d/or district, we invite you to lpful to us as we investigate all
Congregation Name		Pastor's Name	
Congregation Address	City	State	Zip Code

Do you have an insurance policy with Aid Associat	ion for Lutherans? Tyes No	Student Policy Number	
<b>y 1 y</b>		5	

Do you have an insurance policy with Lutheran Brotherhood? Yes No Student Policy Number\_\_\_\_\_

Synodical District of The Lutheran Church-Missouri Synod (If applicable.)