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## STUDENT DATA FORM

2020-2021

Name:	me:			Phone:			
Last			M.I.	best to re	Phone: best to reach you (include area code)		
Address:							
Street			City	State		Zip	
NCCC Student ID # or SSN:			E-mail Address	<b>3</b> :			
Campus attending:		☐ Ottav	va 🗆	☐ Campus Unknown			
What is your major?							
List all colleges previously attended:							
*You must provide an official transcript from each of these colleges to the NCCC Registrar's Office.							
SUPPLEMENTAL A	ASSISTAN	ICE INF	ORMATION (A	JGUST 2020 -	JULY 2021)		
PLEASE MARK ONE: Are you receiv			•				
Yes, I am receiving funds	J		` ,	d them in the box	x below.		
No, I am not receiving funds from outside source(s) and do not have information for the below box.							
-				FALL	SPRING	SUMMER	
Instructions: Do <u>not</u> include any aid awarded by NCCC in the box. Do include supplemental			SOURCE:	Amount	Amount	Amount	
assistance sources such as SRS, Voc		EXAMPL	E: Kansas Works	\$1500	\$1500	?	
community group scholarships, Kansas							
WIA/Heartland Works, etc. <b>Do include</b> assist you in paying for your education							
expenses such as tuition, fees, room &	H-						
care, transportation, living expenses, e							
usually be included. <b>Do include funds</b> to NCCC and/or funds paid to you.	paid directly						
to Neece and/or fullus paid to you.		Do <u>no</u>	<u>it</u> include aid aw	varded by NCC	C in the abo	ove box.	
<b>PLEASE SIGN YOUR AGREEMENT:</b> I hereby authorize Neosho County Community College to transfer funds from my financial aid award to pay for <u>all</u> charges on my business office account including tuition, fees, books, supplies, and residence hall (room/board) expenses (to include tuition and fee charges for federally ineligible course-work). I also authorize NCCC to deduct from my Title IV Federal Financial Aid to pay my current allowable non-institutional charges. These charges being fees other than those required to take courses at NCCC.							
I understand that <u>my aid will be disbuare</u> amounts. I realize credit hours I withd						om my award	
I have read and understand the abo best of my knowledge.	ove informa	ition and	the information I	provided is con	nplete and co	orrect to the	
					Date		
Signature					Date		