

First Name: _____ Last Name: _____ Current Term: _____

Student Id: _____ Phone #: _____ Last 4 digits of SS#: _____

Student Signature Release: _____ Date: ____ / ____ / ____

I have applied for the federally-funded, Education and Training Voucher (ETV) Program for the current term to help meet my post-secondary expenses. I authorize the Financial Aid Office to release my account information to the program:

MUST BE COMPLETED BY FINANCIAL AID OFFICE CURRENT TERM ONLY!

Preparer's Signature: _____ Print Name: _____ Date ____/____/____

Direct Phone #: _____ Email Address: _____

Current Term: *Fall Winter Spring Summer*

of Credits: _____

Total owed to school after financial aid: \$ _____

Student refund after financial aid: \$ _____

Tuition/Fees per term: \$ _____

School Name: _____

Campus: _____

Cost of Attendance per term: \$ _____

* As defined by the Higher Ed Act - tuition, fees, room, board, transportation, supplies, etc*

Has student completed the FAFSA: Yes No Pell Grant Amount Received (per term): \$ _____

*No Pell indicate why: EFC too high Academic Suspension Pending Verification Ineligible why: _____

Does student live on campus? No or Yes \$ _____ Does student have a meal plan? No or Yes \$ _____

MD Tuition Waiver: \$ _____

Perkins Loans \$ _____

Subsidized Loans \$ _____

Unsubsidized Loans \$ _____

Grant/scholarships (current term only):

1.) _____ \$ _____

2.) _____ \$ _____

3.) _____ \$ _____

PLEASE EMAIL FORM TO: MDETVpaperwork@statevoucher.org
Questions? (240)660-3633