# 2008-09 FINANCIAL AID QUESTIONNAIRE

**RETURN TO:**

OFFICE OF FINANCIAL AID
CERRO COSO COLLEGE
3000 College Heights Blvd.
Ridgecrest, CA 93555

Name of Financial Aid Applicant (Please print **using black ink**)

_____
Last First MI

_____
Previous Last Name(s)

_____ _____
Cerro Coso Student ID# @ Date of Birth

1. Your address and telephone number while attending Cerro Coso College:

_____(_____)_____
No. & Street Apt. # City State Zip Telephone No.

2. **ALL STUDENTS MUST ANSWER:**

Parent's Name_____(_____)_____
Telephone No.

Address_____
No. & Street City State Zip

3. Where will you reside while attending Cerro Coso College: [ ] With Parents [ ] Away from Parent's home

4. Will you attend or have you attended another college for:

Fall 2008 Yes [ ] No [ ] Name of College _____

Spring 2009 Yes [ ] No [ ] Name of College _____

**Please Note: It is against Federal Regulations for any student to receive Federal Financial Aid at more than one college or university during the same period of enrollment.**

5. Are you a high school graduate OR [ ] YES Year of Graduation: _____ [ ] NO
Will you be a high school graduate by June 30, 2008?

If NO, do you have a GED? [ ] YES Year received: _____ [ ] NO

This includes recent students who have passed the California High School Exit Exam.
**Note: If you only have a Certificate of Completion from high school, you are not a graduate and you must contact our office immediately.**
**If you answered NO to both of the above questions, you must have completed the Cerro Coso Assessment Test with qualifying scores (Contact the Office of Financial Aid for qualifying scores). You must submit your test results to our office to be considered for financial aid**.

6. What is your educational goal? [ ] BA after completing AA/AS [ ] Vocational Degree / Certificate
[ ] BA without completing AA/AS [ ] AA/AS without transfer

7. Have you previously attended Cerro Coso College [ ] YES [ ] NO. If yes, please list semester and year of last attendance _____. Did you receive financial aid funds? [ ] YES [ ] NO

8. During the period of July 1, 2008 through June 30, 2009 will you receive assistance from any of the following?

[ ] TANF / AFDC [ ] CalWORKS [ ] Rehab

9. List below all scholarships awarded to you for 2008-09:

Name of Scholarship Total Amount

_____ $_____

_____ $_____

I hereby certify that, to the best of my knowledge, the information on this form is correct. I further agree that if any changes should occur, it is my responsibility to inform the Office of Financial Aid.

Signature_____ Date_____