



2011-2012

College of Pharmacy and Health Sciences
Application for Financial Assistance

http://atlanta.merceraid.com/

School Code : 001580

RETURN TO: Mercer University
Office of Student Financial Planning
3001 Mercer University Drive
Atlanta, Georgia 30341-4115
(678) 547-6444
Fax (678) 547-6433

Answer every item, indicating those which do not apply to you as (NA). No application will be considered unless all questions are answered.

PLEASE PRINT

Name: Last First Middle Name Generally Called (Maiden Name if Applicable)

Social Security #: Mercer ID #:

Telephone Number:

Program (SELECT ONE)

Form with three columns for program selection: Physician Assistant, Physical Therapy, and Pharmacy (P1, P2, P3, P4, PhD). Each column has a 'FOR OFFICE USE ONLY' section with checkboxes for various semesters.

Please list all expected "outside" resources, including tuition reimbursement, scholarships, grants, fellowships, tuition benefits, veteran's benefits, or any other financial resources. Under Federal law and university policy, Mercer must consider your outside resources when deciding what other aid you may be eligible to receive.

Table with 3 columns: Source, Amount per term, Comment(s). Multiple rows for listing resources.

For consideration of awards from certain restricted scholarship funds:

Are you a United States Citizen? Yes No If yes, since what date?

Are you a Permanent Resident of the United States? Yes No If yes, since what date?

Submit a copy of form I-551 (Permanent Resident Card) if you are a Permanent Resident, but not a United States citizen.

Are you a Georgia Resident? Yes No If yes, since what date?

Have you received the HOPE Scholarship and anticipate continued eligibility? Yes No

Have you completed/updated a Tuition Equalization Grant and HOPE application online at www.gacollege411.org?

Only pharmacy Georgia residents may be eligible. Yes No

Have you completed a 2011-2012 FAFSA? Yes No Date submitted:

I certify that all the information supplied on this application is true and correct to the best of my knowledge. I understand that my request for financial aid will not be processed until all required forms are on file in the Office of Financial Planning.

Student's signature

Date