

SAM VIERSEN FAMILY FOUNDATION

Email: lisa@viersenfamilyfoundation.org

P. O. Box 702708 Tulsa, OK 74170

(918) 742-1979 or (918) 698-1698

Fax (918) 895-9152

To be returned directly to the Sam Viersen Family Foundation via fax or email if possible.

Financial Needs Analysis (FNA)

PART I – TO BE COMPLETED BY STUDENT

Students Full Name: _____ Maiden Name (if applicable) _____

Mailing Address: _____ City _____ State _____ Zip Code _____

Social Security No: _____ Date of Birth: _____ Telephone: _____

I grant permission to (name of school) _____ to release the information stated below and any other information on my financial aid status and academic progress to the Sam Viersen Family Foundation Scholarship Committee.

Student Signature: _____

PART II – TO BE COMPLETED BY THE FINANCIAL AID OFFICER

***** FORM SHOULD BE COMPLETED FOR SCHOOL YEAR 2017-2018 *****

SCHOOL EXPENSES

Tuition \$ _____
Fees _____
Books _____
Supplies _____
Room & Board _____
Transportation _____
Personal Expenses _____
Other (List) _____

STUDENT RESOURCES

Family Contribution \$ _____
Student Contribution _____
Veteran's Benefits _____
Social Security _____
Fellowships _____
Other (list) _____

AWARDS

PELL \$ _____
SEOG _____
Work Study _____
Perkins _____
GSL/Stafford _____
Unsub. Stafford _____
Tuition Waiver _____
State Tuition Grant _____
University Scholarship _____
Off Campus Scholarship _____
Direct Loan _____
OHLAP _____
PLUS _____
Other (List) _____

Total Expenses \$ _____ Total Resources \$ _____ Total Awards \$ _____

Classification: Fr _____ Soph _____ Jr _____ Sr _____ Grad _____ Part-Time _____ Full-Time _____ Unmet Need \$ _____

FINANCIAL AID OFFICER:

Signature: _____

Email: _____

Date: _____

Tax Identification Number (TIN):

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INSTITUTION:

Name: _____

Address: _____

Phone #: _____

Fax #: _____