

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 2018-2019 *****

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 #: _____