



# AID PLANNING WORKSHEET • 2010-2011

One Stop Student Services - onestop@cwidaho.cc - 208.562.3000 phone - 888.562.3216 fax  
5500 East Opportunity Way - Nampa, ID 83687 - www.cwidaho.cc

Please tell us about your plans for the 2010-2011 academic year (Fall '10 – Summer '11). Information about your preferences and enrollment plans will help us create a customized financial aid package just for you.

\_\_\_\_\_  
LAST NAME FIRST NAME M.I. STUDENT ID -OR- SOCIAL SECURITY NUMBER  
\_\_\_\_\_  
PHONE NUMBER (INCLUDING AREA CODE) DATE OF BIRTH

## COMMUNICATION PREFERENCES

The College of Western Idaho values your time and we want to communicate with you in the most efficient way we can. CWI uses e-mail as much as possible to ensure quick and efficient communication.

How do you prefer to be contacted?  E-mail -OR-  Standard Mail

Your preferred e-mail address - \_\_\_\_\_

## YOUR HIGH SCHOOL

What state was the high school you graduated from in? \_\_\_\_\_

What was your high school graduation date? \_\_\_\_\_ (mm/dd/yy)

## 2010-2011 ENROLLMENT PLANS

Please tell us about the classes you plan to take this academic year - indicate your enrollment plans in EACH of the following:

- 1. FALL '10 semester?  Full Time  3/4 Time  HALF Time  LESS-THAN HALF Time  Will Not Attend
- 2. SPRING '11 semester?  Full Time  3/4 Time  HALF Time  LESS-THAN HALF Time  Will Not Attend
- 3. SUMMER '11 semester?  Full Time  3/4 Time  HALF Time  LESS-THAN HALF Time  Will Not Attend

FULL Time = 12+ credits 3/4 Time = 9 to 11 credits HALF Time = 6 to 8 credits LESS-THAN HALF Time = 1 to 5 credits

Are you transferring to CWI from another college/university?  Yes  No

What degree or certificate are you seeking at CWI?  Associate of Arts  Associate of Applied Science  
 Associate of Science  1 or 2-Year Professional-Technical Certificate

What is your anticipated CWI graduation date? \_\_\_\_\_ (month/year)

## 2010-2011 CHILD/DEPENDENT CARE EXPENSES

Will you pay for child/dependent care so you can attend classes in the 2010-2011 school year?  Yes  No

OUT OF POCKET child/dependent care expenses PER SEMESTER? \$\_\_\_\_\_ (4.5 months/semester - documentation may be required)

## 2010-2011 OTHER SOURCES OF AID/FINANCIAL ASSISTANCE

Will you be receiving any form of tuition assistance/scholarship from sources other than CWI (not including family members) for the 2010-2011 year? Examples: Idaho Dept. of Labor, Voc Rehab, WIA, or outside scholarships.  Yes  No

## SIGN THIS WORKSHEET

I certify that all the information reported on this document is true and correct to the best of my knowledge. I understand that if I purposely give false or misleading information I may be subject to a fine, imprisonment, or both. I also authorize the College of Western Idaho to make any necessary electronic corrections to my FAFSA based on the information submitted.

\_\_\_\_\_  
STUDENT SIGNATURE DATE

CWI delivers college credit instruction, certificates and degrees through its memorandum of understanding with the College of Southern Idaho (CSI). CSI is accredited through The Northwest Commission on Colleges and Universities (NWCUU).