

ROBERT 'AQQALUK' NEWLIN, SR. Memorial Trust
P.O. Box 509 Kotzebue, AK 99752
(907) 442-1607 / Fax (907) 442-2289
FINANCIAL AID PACKAGE / NEED SHEET

Student Information:

Student Name:	College/University Name:
Mailing Address:	Mailing Address:
Social Security Number:	Phone number:
Date of Birth:	Class Standing: Freshman Sophomore Junior Senior
Name of Native Corp:	Major:
Material Status:	Number of credits earned so far:
Name of Spouse:	Number of credits per this semester/term:
Number of Dependents:	Term/Semester begin date:
Phone Number:	Graduation Date:

Student Resources and Institution awards:

University Budget:

Starting Date:	2022	2022	2023	2023	TOTAL	
TYPE OF AID:	FALL	WINTER	SPRING	SUMMER	TOTAL	
AFDC or Welfare						Tuition: \$
Alaska Student Loan						Fees: \$
College Scholarship						Room: \$
College Work Study Program						Board: \$
National Direct Student Loan						Books: \$
PELL Grant						Other (specify): \$
Parent/Spouse Contribution						
SEOG						
Social Security						
Students Contribution						
Tribal Assistance						
Tuition Exemption						
Veterans Benefits						
Other (Specify)						Total: \$

Total Resources: \$ _____

Total Unmet Need: \$ _____

University Notes:

Release of Information Authorization:

Student Signature: _____ Date: _____

Financial Aid Officer Name: _____ Contact Number: _____

Financial Aid Officer Signature: _____ Date: _____