

financial assistance offered is limited by the availability of funds in any given year. I/We also understand that approval of this request is contingent upon review of the accuracy of information. Any discounts awarded to me will be credited in Semester 2 on the students ledger.

Credit Balances

In addition, I understand that I am applying for a tuition discount to pay for my direct tuition costs of my educational program. I also understand that if I am awarded a discount, that I cannot have a credit balance on my account for the approved semester. In the event, a credit balance is created, my tuition discount will be reduce to eliminate the credit balance. _____ (INITIAL HERE)

Withdrawal and Eligibility Loss

If I withdraw from the enrolled program, I understand that I will lose my eligibility for the discount and must re-apply for the discount in order for Eagle Gate to re-evaluate my eligibility.

THIS FORM MUST BE SIGNED BY ALL APPLICABLE PARTIES BEFORE CONSIDERATION CAN BE MADE.

Student Name- Please Print

Students Signature

Date

Last four of Student Social Security Number