



AID PLANNING WORKSHEET • 2009-2010

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

Please tell us about your plans for the 2009-2010 academic year (Fall '09 – Summer '10). 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 - _____

2009-2010 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 '09 semester? Full Time 3/4 Time HALF Time LESS-THAN HALF Time Will Not Attend
- 2. SPRING '10 semester? Full Time 3/4 Time HALF Time LESS-THAN HALF Time Will Not Attend
- 3. SUMMER '10 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

When do you expect to graduate from CWI? _____ (mm/dd/yy)

2009-2010 CHILD/DEPENDENT CARE EXPENSES

Will you pay for child/dependent care so you can attend classes in the 2009-2010 school year? Yes No

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

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).