



JOHN WITHERSPOON
COLLEGE

FINANCIAL AID FORM

This form is designed to help us distribute our need-based scholarships or work study programs. Please fill it out to the best of your ability and contact the Admissions office if you have any questions about requested information.

A. GENERAL INFORMATION

Student Name: _____
Last First Middle

Permanent Address: _____
Street City State/Zip

Home Phone: _____ Mobile Phone: _____

U.S. Citizen: (Check one) _____ Yes _____ No If not, are you a:
_____ Permanent Resident _____ Resident Alien _____ Non-resident Alien

Date of Birth: _____ Email: _____

B. STUDENT INFORMATION

Do you intend to be a full-time student? _____

How far is your college commute in miles? _____

Year in College: _____

Current Savings: _____

Current Employer: _____

Total Net Yearly Income: _____

Taxable Income from last year's Federal Return

Use back of page to explain in your own words why you are in financial need of a scholarship or work study. You may also provide additional information about your finances to support your application or to clarify responses above.

C. PARENT INFORMATION

(Fill out only if you are claimed as a dependent on parents' tax return)

Marital Status: _____
(If divorced, use information from custodial parent)

Number in Parental Household: _____

Number of Children in College Full-Time: _____
(including applicant)

Total Net Yearly Income: _____
(including tax-free income)

Taxable Income from last year's Federal Return:

D. TYPE OF FINANCIAL AID (Circle all that Apply)

SCHOLARSHIP(S)

WORK STUDY

Additional Notes:

Deliver or mail form to:

*Admissions Office
John Witherspoon College
4024 Sheridan Lake Road
Rapid City, South Dakota 57702*

Or scan and e-mail form to:

admissions@jwc.edu