

Wyoming Catholic College is committed to making the unique education it offers available to qualified students regardless of their financial need. The College must insist, however, that each student and his or her parents contribute as much as possible toward the cost of the student's education.

*Please complete the form using blue or black ink. Leave colored spaces blank.*

**2023-2024 FINANCIAL AID APPLICATION**

**A. APPLICANT'S AND PARENTS' INFORMATION**

	Student	Mother	Father	Non-Custodial Parent
<b>Indicate Status:</b>		<input type="radio"/> <b>Mother</b> <input type="radio"/> <b>Stepmother</b> <input type="radio"/> <b>Legal Guardian</b>	<input type="radio"/> <b>Father</b> <input type="radio"/> <b>Stepfather</b> <input type="radio"/> <b>Legal Guardian</b>	<input type="radio"/> <b>Mother</b> <input type="radio"/> <b>Father</b>
<b>Name:</b>				
<b>Social Security Number:</b>				
<b>Date of Birth (MM/DD/YYYY):</b>				
<b>Birth Year of Older Parent:</b>				
<b>Driver's License Number:</b>				
<b>Address:</b>				
<b>City, State, Zip Code:</b>				
<b>Home Phone:</b>				
<b>Cell Phone:</b>				
<b>Work Phone:</b>				
<b>Email Address:</b>				
<b>Occupation:</b>				
<b>Employer:</b>				
<b>Unemployment Date:</b>				
<b>Retirement Date:</b>				
<b>Who claimed the student as a tax exemption?</b>				

**B. Native American Grant**

<b>Are you possibly eligible for the Native American Grant ?</b>	<b>Please provide a copy of documentation which shows the student's tribal affiliation and tribal enrollment number.</b>			
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**C. APPLICANT'S AND PARENTS' FINANCIAL DATA**

<b>Financial Information:</b>	<b>Student</b>	<b>Mother</b>	<b>Father</b>	<b>Non-Custodial Parent</b>
<b>2021 Taxes Filed As:</b>	○ <b>Form 1040</b>	○ <b>Form 1040</b>	○ <b>Form 1040</b>	○ <b>Form 1040</b>
<i>Attach Copies of the Following Documents, if applicable:</i>	<b>Document Specified Above</b>	<b>Document Specified Above</b>	<b>Document Specified Above</b>	<b>Document Specified Above</b>
	<b>2021 W-2</b>	<b>2021 W-2</b>	<b>2021 W-2</b>	<b>2021 W-2</b>
	<b>Social Security Benefit statement, (Only if receiving Social Security Benefits)</b>	<b>Social Security Benefit statement, (Only if receiving Social Security Benefits)</b>	<b>Social Security Benefit statement, (Only if receiving Social Security Benefits)</b>	<b>Social Security Benefit statement, (Only if receiving Social Security Benefits)</b>
	<b>Welfare Benefits statement</b>	<b>Welfare Benefits statement</b>	<b>Welfare Benefits statement</b>	<b>Welfare Benefits statement</b>
<b>Number in Parents' Household</b> <i>Count student, parents, parents' other children, and grandparents, if applicable.</i>				
<b>Number from above answer that will attend program at least half-time that leads to college degree or certificate.</b> <i>Exclude those in military service academies.</i>				
<b>Child Support Received</b> <i>Exclude Foster Care or Adoption Payments.</i>				
<b>Child Support Paid</b>				
<b>Veteran's Non-education Benefits, such as Disability, Death Pension, Dependency &amp; Indemnity Compensation, VA Educational Work-Study Allowance.</b>				
<b>Other Untaxed Income, such as Worker's Compensation, Disability, Etc.</b>				
<b>Cash, Savings, &amp; Checking Total</b> <i>For student, do not include funds for \$3,000 summer payment.</i>				
<b>Investments-Current Value</b> <i>EXCLUDES primary residence, real estate, farms, college savings plans, &amp; retirement plans.</i>				
<b>Investment Debt</b> <i>Investment debt only; do not include mortgage for primary home, personal or credit card debt.</i>				
<b>Real Estate Investments - Debt</b> <i>Do not include primary mortgage.</i>				

<b>Business and/or Farm -Current Value</b>				
<b>Business and/or Farm - Debt</b>				
<b>Business and/or Farm -Number of Employees</b>				
<b>Pension or Annuity Value</b> <i>Only include if currently receiving income from it.</i>				
<b>College Savings or 529 Plans -Current Value</b>				
<b>Trusts -Current Value</b>				

**D. STUDENT'S AND PARENTS' PROJECTED INCOME AND BENEFITS**

If either the student's or parents projected total income and benefits will differ substantially in the year following the income and benefits provided, please explain on an additional sheet describing the anticipated cause and amount of the change.

**E. SPECIAL CIRCUMSTANCES AND EXPLANATIONS**

If there are any special circumstances or further explanations of your family's situation that you would ask the Financial Aid Office to consider in connection with your application, please explain them on an additional sheet. For example, such factors could include medical expenses, elder care, or debt.

**F. FAMILY MEMBERS' INFORMATION**

Provide anticipated tuition expenses for the applicant and the applicant's immediate family members for the 2023-2024 academic year. If more space is required, make a copy of this page.

	Applicant	Sibling #1	Sibling #2	Sibling #3	Sibling #4	Sibling #5	Sibling #6
<b>Name:</b>							
<b>Age:</b>							
<b>Name of School:</b>	WCC						
<b>School's Location:</b>	Wyoming						
<b>List type of school:</b> <i>Elementary, Secondary, College, Graduate</i>	College						
<b>Total Cost (Including Room &amp; Board):</b>	\$37,750						
<b>Please list the payments from Family:</b>							
<b>Registration Deposit</b>	\$500						
<b>Student's Summer Earnings</b> <i>(minimum \$3,000)</i>							
<b>Student's Savings</b> <i>(do not include summer earnings or college savings)</i>							
<b>College Savings or 529 Contribution</b>							
<b>Parents' Payment</b>							
<b>Financial Aid from the School:</b>							
<b>Work Study</b> <i>(WCC maximum \$3,300)</i>							
<b>Merit or Founders' Scholarship</b>							
<b>Outside Sources:</b>							
<b>Outside Scholarships</b>							
<b>Financial Aid Anticipated:</b>							
<b>Student Loan:</b> <i>(suggested amounts)</i> <i>Freshman \$4,500      Sophomore \$5,500</i> <i>Junior \$6,500      Senior \$7,500</i>							
<b>Parent Loan:</b> <i>Suggested amount per family \$2,000</i>							
<b>WCC Grant expected:</b>							
<b>Total Financial Package:</b>	\$37,750						

**G. CERTIFICATION**

*By my signature below, I certify that the information on this form is true and complete to the best of my knowledge. I understand that the deliberate inclusion of false or misleading information will result in the loss of eligibility for institutional aid. If asked, I agree to provide proof of the information given on this form. I certify that all information is correct as of this date and that I will send timely notice of any significant changes in income, assets, financial situation, educational plans for other family members, or the receipt of other scholarships, loans, or grants. By signing below, I, the student, hereby agree to allow Wyoming Catholic College to discuss matters that relate to my financial aid with the parent(s) whose information is provided during the financial aid process. I understand that I can withdraw this permission at any time by submitting a written request to the Financial Aid Office.*

	Student	Mother	Father	Non-Custodial Parent
<b>Name:</b>				
<b>Date:</b>				

Please return this form and all required attachments to

Wyoming Catholic College, Financial Aid Office  
 306 Main Street  
 Lander, WY 82520  
 Fax: 307-332-2918  
[financialaid@wycatholic.edu](mailto:financialaid@wycatholic.edu)

Contact:

Christina Bolin  
 Director of Financial Aid  
 Direct line (307) 438-9021  
 (Updated 02/20/2023)