

Part 1. To be completed by student and forwarded to a university financial aid office. Please read all instructions carefully.

SSN: _____ Name: _____ Student ID# _____

Address: _____ Phone: (____) _____

“I understand I must submit the Free Application for Federal Student Aid (FAFSA) and apply for campus-based aid. I agree to do so no later than June 30, 2023. I am responsible for contacting NHI prior to June 30, 2023 for the AY 2023-2024 to confirm that this form has been received. If I DO NOT comply with the NHI Criteria I understand my application will be denied”. **Release of Information:** I authorize the institution represented below to provide any/all information requested to NHI in order to evaluate my student financial need (including revisions) throughout the academic period covered in this application.

Applicant’s Signature: _____ Date: _____

Indicate the academic period for which you want the college financial aid office to provide budget information.

- AY 2023-2024** (Sept.-May/9 month period ONLY) or **2023-2024 Partial Year** specify terms: Fall Winter Spring

PART 2. FINANCIAL AID OFFICE: Complete Part 2 for the period checked above. The **final deadline** for this form to be in NHI’s office is July 15, 2023 for the AY 2023-2024 with no late exceptions. Faxed FNFs are not accepted, scanned copies allowed to tanya@loving-service.us but please follow-up by mailing original. **Please estimate cost & resources if the student file is not complete by NHI’s deadline.** We cannot consider the student’s application until NHI receives this completed form. See page 2 for further instructions.

Budget Period: Check only one.

- Academic Year: Aug/Sept 2023– May 2024
 2023-2024 Partial Year, Specify: Fall Winter Spring

Academic Term of Student’s Program:

- Please check one: **Semester** **Quarter**

Cost of Attendance:

Tuition \$ _____
Fees _____
Book & Supplies _____
Room & Board _____
Personal/Misc _____
Transportation _____

Campus-Based Aid and Other Resources:

Perkins \$ _____	Student Contribution _____
Stafford _____	Indian Health Service _____
Work Study _____	Dept. of Education _____
Scholarship _____	Assistantship _____
School Grant _____	Pell Grant _____
Tuition Waiver _____	SEOG _____
Tribal Assistance _____	Other: _____

TOTAL COST: \$ _____

TOTAL RESOURCES: \$ _____

UNMET NEED: \$ _____

The following question must be answered:

Has student submitted Free Application for Federal Student Aid (FAFSA) and campus-based aid application? _____

Comments: _____

University: _____ FAO Print Name: _____

Address: _____ Signature: _____

City/State/Zip: _____ Title: _____

FA Office Phone: (____) _____ Date Signed FNF: _____

Fax: (____) _____ Email: _____

**Mail original to: NHI | PO Box 26374, Albuquerque NM 87125
or email to tanya@loving-service.us Deadline: July 15, 2023**