

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, 2025. I am responsible for contacting NHI prior to July 18th, 2025 for the AY 2025-2026 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 2025-2026** (Sept.-May/9 month period ONLY) or ☐ **2025-2026 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 18, 2025 for the AY 2025-2026 with no late exceptions. Faxed FNFs are not accepted, scanned copies allowed to jules@lovingsservice.us, 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 2025– May 2026

☐ 2025-2026 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 jules@lovingsservice.us Deadline: July 18, 2025