Sherman College of Chiropractic

Student ID: **A0000000000**

123 Main Street
Boiling Srpings, SC 29316

Dear Student,

Financial aid is a fact of life for most college students. Scholarships, loans, work programs, help students afford the investment of a college education. It is a pleasure for us here at the Sherman College Financial Aid Office to assists you with this investment.
If you are a **new student please print this form.** You must sign and return a copy to reserve funds. Otherwise, listed below are financial aid funds which you qualify for during the upcoming loan period. These are available through federal, state, and/or institutional sources and are based on expected FULL time attendance. You must electronically "accept" or "deny" in order to reserve these funds.

Should you have any questions, please contact the Financial Aid Department to make an appointment to review your awards and eligibility.

Award Amount Distribution Amount

	FA-14	SP-15	WI-15	Total
Federal Unsubsidized	$11,000.00 **$10,882.00**	$11,000.00 **$10,882.00**	$11,000.00 **$10,882.00**	$33,000.00 **$32,646.00**
Federal Work Study	$0.00 **$0.00**	$324.00 **$324.00**	$324.00 **$324.00**	$648.00 **$648.00**
Grad Plus loan	$2,298.00 **$2,200.00**	$1,974.00 **$1,890.00**	$1,974.00 **$1,890.00**	$6,246.00 **$5,980.00**
Total	**$13,298.00** **$13,082.00**	**$13,298.00** **$13,096.00**	**$13,298.00** **$13,096.00**	**$39,894.00** **$39,274.00**

By accepting the awards indicated above, I affirm I will use any funds under the Federal Unsubsidized Stafford, Perkins Loan, GRAD PLUS Loan or Federal Work Study program solely for expenses related to attendance at Sherman College of Chiropractic. I understand that I am responsible for repaying any funds I receive which cannot reasonably be attributed to meeting my educational expenses at the College. I affirm that I am a U.S. citizen or permanent resident, that I do not owe a repayment on a Pell Grant, a Supplemental Educational Opportunity Grant, or a State Student Incentive Grant, and under penalty of perjury that the above is true and correct. I certify that I have fully read and understand the conditions of this award and agree to them. I understand that Sherman College of Chiropractic may directly apply awards which I accept to my account.

_____ _____ _____ _____

Student Signature Date Financial Aid Representative Signature Date

BALANCE DUE WORKSHEET: This does not include any payments already made or other charges that may have been posted to your account.
*Remaining Need (below) is the difference between cost of attendance and financial aid awarded. **YOU DO NOT OWE THIS AMOUNT**.

Direct Costs	
Living Expenses	$18,000.00
Tuition and Fees	$21,543.00
Loan Fees	$351.00
Total Costs: $39,894.00	

Balance Due	
Total Cost:	$39,894.00
Less Alt EFC:	$0.00
Total Need:	$39,894.00
Awards (both need and non need):	$39,894.00
Remaining Need: $0.00	