

OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS 2023-2024 Institutional Application for Aid

NAME:	Student ID#:	
This document is mandatory and must be completed and u	ploaded to your Self Service portal	
Please provide your email address:		
*IMPORTANT M This email address will be used to send important messages		you are assigned
your Atlantic Cape Buccaneer email address. It is important e-mail address.	t to contact our office if you change	
Question	Yes	No
Do you have an Associate's Degree?		
Are you a New Jersey Stars Student? Students must be in a (2005 graduate or greater) high school class to have been required to submit a high school transcript to the Admission indicate "Yes".	considered. You will be	
Are you interested in receiving financial aid through our coprogram?	ollege work-study	
The Federal College Work Study Program (FCWSP) provide students who have financial need. The work schedule is be schedule. Where possible, Atlantic Cape places students in their major course of study, interest and skills. As a recipie Study Award, you are being given a unique opportunity to experience along with your college education. For more dehttp://www.atlantic.edu/finaid/work-study.php	uilt around the class n jobs that relate to ent of a Federal Work gain practical work	

*A physical electronic signature is required. A typed or script signature will not be accepted. By signing this application, you agree to allow Atlantic Cape Community College the right to mail any or all correspondence to the email address you listed until you are assigned your Atlantic Cape Buccaneer email.

Student Signature: _

Date:

It is the student's responsibility to check all Atlantic Cape assigned emails for important information. Failure to read correspondences could result in ineligibility.