



FINANCIAL AID APPLICATION PRIORITY DEADLINE: March 1, 2024

****In addition to this application, you will need to complete a 2024/2025 FAFSA at <https://fafsa.gov> ****
If you routinely apply for the PLUS loan, please do not apply before March 1st for summer or July 1st for fall.

Please contact the university at studentaccess@bastyr.edu if you require special accommodation due to a disability.

Unless you have a Bastyr email address, this form needs to be printed out and signed with ink, then sent to the Financial Aid Office via:

Mail:
Office of Financial Aid
14500 Juanita Dr. NE
Kenmore, WA 98028

OR

Email attachment:
finaid@bastyr.edu

OR

Fax:
(425) 602-3300

preferred method

Bastyr students may complete this application and email it (without signature) to finaid@bastyr.edu IF the form is SENT FROM YOUR BASTYR.EDU EMAIL. Forms sent from other email addresses are not able to be considered electronically signed.

NOTE: Incomplete applications and missing documentation could delay processing of your financial aid. When completing this form answer all questions.

DEMOGRAPHICS *Continuing Bastyr student* *New student to Bastyr*

Which campus will you attend during the 2024/2025 school year? Kenmore San Diego Fully online

First Name _____ Last Name _____ Middle Initial _____

Social Security Number _____ - _____ - _____ (If a returning student list only the last four digits)

Date of Birth ____ / ____ / ____ Email Address: _____

Are you, or will you be, incarcerated (including work release) during the 2024/25 school year? Yes No

Level of degree: Graduate Undergraduate Certificate Post Baccalaureate

Do you plan to take *prerequisite courses at any Bastyr campus during the summer of 2024? Yes No
(*courses needed to be admitted into a degree program)

Will you be receiving an outside scholarship, free tuition as faculty/staff, or a private student loan during the 2024/2025 academic year? Yes No (if yes, we will contact you via email for details)

List your degree (program) at Bastyr and estimated date of graduation (list both degrees and dates if you are dual track):

I am applying for (check all that apply): Grants Loans Work Study

For the following terms:

_____ Summer 24 _____ Fall 24 _____ Winter 25 _____ Spring 25

ESTIMATED NUMBER OF CREDITS: (do not include audits and put a NUMBER on the lines above)

To find this information, refer to your program's curriculum (available on our website), or contact your Advisor in the Registrar's Office.

PLEASE NOTE: You must be enrolled at least half-time to receive financial aid. If you receive financial aid but do not attend any classes, you will need to repay all aid. I understand this requirement: Yes No

Electronic communication disclosure:

Bastyr University uses electronic means (email and website) to provide required notifications to you. We feel this is the fastest and greenest way to communicate. We encourage you to consent to this form of communication. If, however, you would prefer to receive all notices printed out and put in your student mailbox, you may opt out of electronic communication by notifying the Director of Financial Aid, in person, in writing, via email or by phone. You may do this at any time during your attendance at Bastyr, even if you have previously authorized electronic communications.

The types of notices that we provide electronically include (but are not limited to):

- Application process reminders
- Financial Aid Office policies
- Award letters
- Disbursement notices
- Scholarship opportunities
- Satisfactory Academic Progress notices
- Loan counseling information
- Work study information

Parking Fee Payment Authorization:

Bastyr University will charge a quarterly parking fee to your student account unless you request this fee be waived for non-use. We cannot use federal financial aid to pay this fee unless you give us authorization to do so. By signing this form, you are giving your express authorization to pay your parking fees (if any) with your federal financial aid for the 2024/2025 school year. If you prefer to pay these charges yourself, you may opt-out of this authorization by notifying the Director of Financial Aid, Danette Grace Wells, in person, in writing, via email or by phone. You may do this at any time during your attendance at Bastyr, even if you have previously authorized parking fee payment.

Tuberculosis (TB) Testing Payment Authorization:

If you are in a program with a clinical component, Bastyr University will charge a one-time fee to you to pay for a TB test. We cannot use federal financial aid to pay this fee unless you give us authorization to do so. By signing this form, you are giving your express authorization to pay your TB test fees (if any) with your federal financial aid for the 2024/2025 school year. If you prefer to pay these charges yourself, you may opt-out of this authorization by notifying the Director of Financial Aid, in person, in writing, via email or by phone.

CERTIFICATIONS – Please sign and date below. Your application will not be processed without your signature in this section. If you are completing this electronically and emailing it to our office from a non-Bastyr email address, you must either scan your original signature then email, or send it by post, or fax this page with signature.

All of the information provided by me or any other person on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide proof of the information that I have given on this form. I realize that this proof may include a copy of my U.S., foreign, state, and/or local income tax return. I also realize that if I do not give proof when asked, I may be denied aid. I certify that I, the student, do not owe a refund on any federal student grant and am not in default on any federal student loan. I also have not borrowed in excess of the federal student loan limits, under the federal student aid programs, at any institution, or any combination of institutions. I will use all financial aid funds received only for expenses related to my study at Bastyr University. I consent to receive all financial aid notices via electronic means. If I want to opt out of electronic communications, I will contact the Director of Financial Aid. **Warning: To receive any Title IV financial aid, you must sign below.** If you purposely provide false or misleading information on the FAFSA or on this application, you may be fined \$20,000, sent to prison, or both.

Printed Name

Signature**

Date

****No handwritten signature is needed if this form is submitted through email from a bastyr.edu email account. This form should be attached to an email and sent to finaid@bastyr.edu.**