

FINANCIAL AID APPLICATION | BOSTON

RETURN THIS FORM BY EMAIL, FAX or MAIL TO:

GCTS Financial Aid Office
130 ESSEX STREET
SOUTH HAMILTON, MA 01982
Phone: 978-646-4018; Fax: 978-646-4601
EMAIL: finaidinfo@gcts.edu

**2018-2019 Academic Year
BOSTON CAMPUS**

Section I: Student's (or Prospective Student's) Information

1. Your name _____
Last First Box # SSN - Last 4 Digits Student ID

2. Your permanent mailing address _____
Number, Street, and Apartment Number City State Zip Code

3. E-mail address #1 _____ E-mail address #2 _____

4. Phone number _____

5. I am attending the Boston campus as a:

- New student Returning student

6. Your degree objective at Gordon-Conwell:

M.DIV MA: _____

TH.M: If yes, indicate which terms:
 SUM II 2018 JAN 2019 SUM II 2019

VISITING STUDENT*
 SPECIAL* DIPLOMA* D.MIN*
** Students in these programs are not eligible for federal student aid and should not complete this application.*

7. Year in which you expect to complete your degree:

I plan to graduate in (check one):
 May October January of (year): _____

8. Year in graduate school, (check one):

- 1st 2nd 3rd 4th or more

9. Vocational goal _____

10. Enter the number of courses AND total credits you plan to take during each term. You may need to visit your campus' registration page to determine how many credits each of your courses are.

Note: You must take at least 6 credits in the Fall or Spring, and at least 6 credits in a Summer semester in order to be eligible for federal student loans.

	NUMBER OF COURSES	TOTAL CREDITS
FALL 2018		
SPRING 2019		
FULL SUMMER 2019*		
SUM I 2019*		
SUM II 2019*		

* Our policy is to award loans for the fall and spring terms only. However, a summer loan may be requested. To investigate a summer loan, you send an email request no earlier than April 15th and no later than two weeks prior to the end date of your summer classes to: finaidinfo@gcts.edu.

