## FINANCIAL AID NEEDS ANALYSIS INFORMATION

	PART 1 – TO E	E COMPLET	ED BY STUDENT:		
NAME:	S	student ID #: _	TRI	TRIBE:	
ADDRESS:			CITY:		
STATE:	ZIP CODE:		E-MAIL:		
TELEPHONE NUMBER	k:	ALTERNA	TE NUMBER:		
I give permission for the Indian Education (BIE). ' will be taken on my appl	Γhe BIE office will ne	ed financial aid	d information listed in F		
HigherEducation@bie.ed	lu				
		Stude	nt's Signature	Date	
This student has applied			r a scholarship. Please	complete and email to	
HigherEducation@bie.ed	u. Thank you for your	assistance.			
PART I	I - MUST BE COMP	LETED BY T	THE FINANCIAL AII	O OFFICE	
Student's applicat	plied for financial aid ion is incomplete and	cannot be cons	idered.		
BUDGET PERIOD – Fro			Start date:		
ROOM/BOARD: \$ BOOKS: \$		STUDENT/SF	RESOURCES FAL CONTRIBUTION POUSE CONTRIBUTE PELL GRANT LOANS STATE GRANTS HER SCHOLARSHIPS TRIBAL AWARD TOTAL RESOURCES	S	
IMPORTANT: RIE	nrocesses award nav	ments via elec	tronic funds transfer (	(EFT). The	
college/university's l	INANCIAL INSTIT	TUTION OFF	ICE must provide an l	UEI number and have	
	_		l payment. BIE DOES ent personal bank acc		
				<del></del>	
-	SIGNATURE FINANCIAL A	AID OFFICER	PHONE NUMBER	DATE	
<u>UEI Number</u> _		_ Is your S	AM.GOV REGISTRA	ATION CURRENT?	
Name of College/Uni	versity				
City	State	Zip		Email Address	