Cairn University Graduate Programs Financial Aid

Students should complete one application for the year.

Need-Based Grant Application

Student Name				
Social Security # or Ca	irn ID#:			
Application Informati	on:			
application an	grant, complete a 2022- nually. ration will be given to ac		-	
Enrollment Information	on:			
Check each te which you expect to re	rm that you expect to be egister:	e a full-time student	and indicate the numb	er of credits for
	Semester	Deadline	Credits	
	☐ Summer 2022	April 15 th		
	☐ Fall 2022	August 1st		
	☐ Spring 2023	November 15 th		
Personal Information: Are you a Veteran of t	he U.S. Armed Forces?	□Yes □No		
If yes, do you expect t	o receive benefits?	Yes ⊔No		
Grant Information:				
	rovide tuition reimburse non-Cairn sources?	•	are eligible or are you	scheduled to
<u>If Yes, Ple</u>	ase list the sources belo	<u>ow</u> :		
Source:			Amount:	
Source:			Amount:	

am also applying for the following Cairn University aid*:	
☐ Other	
☐ Church Match Scholarship	
☐ Spouse Discount	
☐ Organization Discount	
☐ This is the only University Aid I am applying for	
*See your Admissions Counselor for details	
Describe the circumstances regarding your request (add additional page if needed):	
State your career objectives/ministry goals after graduation (add additional page if n	eeded):
Statement of Affirmation:	
affirm that the facts set forth in this graduate need-based grant application are true understand that misrepresentation or omission of any data will be considered suffice revocation of any Cairn University assistance.	•
Signature	Date
Incomplete applications will not be considered. Review your application for complete	ness and accuracy.
Please submit your signed application to:	
Cairn University	
Financial Aid Office 200 Manor Avenue	
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P: 215.702.4246 F: 215.702.4248 E: finaid@cairn.edu

Langhorne, PA 19047-2990