Student Data Form 2020-2021

Student ID: W00_____ Social Security #:_____ - _____ - _____

First Name: _____ MI: _____ Last Name: _____

Date of Birth: _____Home Phone: _____

Cell Phone: _____ Email Address: _____

Semesters you plan to **ATTEND** WSU Tech (circle all that apply):

FALL 2020 (Aug – Dec) **SPRING** 2021 (Jan – May) **SUMMER** 2021 (June/July)

Program you plan to enroll/are enrolled in: _____

Anticipated Graduation Date: _____(month) _____(year)

☐ Please check here if you **HAVE** received a bachelor's degree.

By signing this form, I certify that all of the information reported to qualify for Federal student aid is complete and correct.

Student signature _____Date_____

In addition to the Student Data Form, WSU Tech will require all students who will be utilizing financial aid to complete a Student's Rights and Responsibilities Form.

Should you have someone you would like to have access to your information here at WSU Tech, and/or be able to contact us on your behalf, the Consent to Release Form is available upon request.

WSU Tech
Financial Aid
4004 N. Webb Rd. Wichita, KS 67226
316-677-9400

If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.