

Student Data Form 2021-2022

Student ID: W00	Social Security #:	
First Name:	MI: Last Name:	
Date of Birth:	Home Phone:	
Cell Phone: E	mail Address:	-
Semesters you plan to ATTEND WSU Tech	(circle all that apply):	
FALL 2021 (Aug – Dec)	SPRING 2022 (Jan – May)	SUMMER 2022 (June/July)
Program you plan to enroll/are enrolle	ed in:	
Anticipated Graduation Date:	(month)	(year)
Please check here if you HAVE receive	ed a bachelor's degree.	
By signing this form, I certify that all of the	information reported to qualify for Fe	deral 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