



STUDENT SUPPORT SERVICES  
GRANT AID APPLICATION  
2022-2023

**KANSAS STATE**  
**UNIVERSITY**

Salina

Aerospace and Technology Campus

PERSONAL INFORMATION

First Name:		WID:	
Last Name:			
Are you a Pell Grant recipient?	YES NO		
Will you be a Freshman or Sophomore in the Spr. '23 Semester?	YES NO		
Did you attend a Financial Literacy Workshop this Fall?	YES NO		

Please list any additional SSS sponsored activities that you have participated in: (workshops, cultural events, programming, etc.)


Please list courses you anticipate enrolling in for the Spr. '23 Semester (you may attach KSIS schedule):

1.	
2.	
3.	
4.	
5.	
6.	

Cumulative GPA: First semester Freshman please indicate: "N/A"		Total # of Credit Hrs. <u>Completed</u> as of the start of Fall '22 Semester: First semester Freshman - please indicate: "N/A"	
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Please summarize why you came to college, your academic/personal objectives and goals and how this Award could assist you as a student at K-State Salina.

**(PLEASE ATTACH A TYPED SUMMARY (Two - page Minimum/Four - page Maximum))**

**\*Note: Any summary not meeting the 2/4 guideline will not be reviewed.**

Signed:

Dated:

For office use only

Date Received in Office: