



FINANCIAL AID APPLICATION FIRST-TIME APPLICANT 2010 – 2011

THE COLLEGE OF THE BAHAMAS :: OFFICE OF FINANCIAL AID & HOUSING :: OAKES FIELD CAMPUS

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General Instructions & Application Form

OVERVIEW OF FINANCIAL AID

The College of The Bahamas is committed to trying to meet the financial needs of students and to make sure that no student is deprived of the opportunity to earn a degree solely for financial reasons. The College is committed to equitable, transparent, timely and consistent practices in the awarding of financial aid to students. Currently The College's financial aid is available to students in undergraduate degree programmes only. A limited number of exceptions are provided for in granting aid to College Preparatory students.

WHAT IS FINANCIAL AID?

- Financial Aid is financial assistance that The College disburses to students who apply for it, which is awarded and allocated according to a measurement of demonstrated financial need.
- All expenses related to attending The College and all financial resources available to the student applicant are measured to determine the package of aid awarded.
- Financial Aid does not include research awards, research grants or academic internships. These types of grants must be declared as income resources available to the student applicant.

HOW DO I QUALIFY TO RECEIVE FINANCIAL ASSISTANCE FROM THE COLLEGE?

- To qualify for financial aid you must complete and submit a financial aid application with its required documentation by the given deadlines.
- To be eligible for receiving aid, your level of financial need will be assessed and the amount of your financial aid package is determined based on the level of need that is calculated.
- To be eligible for financial aid you must be a Bahamian citizen or a child under the age of 25 of a Bahamian citizen.
- To be eligible for financial aid applicants must be, or plan to be, registered and enrolled in full time undergraduate degree study as defined by The College policies.
- College preparatory students are not eligible to receive financial aid, with some exceptions made in the cases of high school graduates as outlined in our school exemptions list for this purpose.
- To retain financial aid, applicants must remain in good academic standing.
- Financial aid will not be renewed beyond 3 years of full-time study for Associate degrees and 6 years for full time study for Baccalaureate degrees.
- When making plans to attend COB, it is important to calculate the full Cost of Attendance in your financial planning (See sample Attendance Budget Below). When calculating your aid package, your COB billing will be factored in determining the level of aid you receive. Best measures will be taken to ensure that the aid package you receive meets the difference between what you can afford to pay and your costs incurred to attend. The table below indicates a sample attendance budget.

	Annual cost	Annual cost	Total cost
	1st & 2nd year	3rd & 4th year	4 years
Tuition & fees	\$ 3,700.00	5,200.00	17,800.00
Books & supplies	\$ 1,500.00	2,000.00	7,000.00
Subtotal	\$ 5,200.00	7,200.00	24,800.00
Subsistence Costs (only in the case of students attending College not on their home Island)	\$ 2,000.00	2,000.00	8,000.00
Total	\$ 6,700.00	8,200.00	32,800.00

OVERVIEW OF THE FINANCIAL AID APPLICATION PROCESS

- Step One: Complete a Financial Aid application form
- Step Two: Submit application with required documentation to the Financial Aid office by stipulated deadline
- Step Three: New students, first time applicants and renewal applicants will be notified of their financial aid package by August 19th, 2010.

APPLICATION CHECKLIST

COMPLETED APPLICATION AND SUPPORTING DOCUMENTS MUST BE SUBMITTED TO THE FINANCIAL AID OFFICE BY JULY 31ST, 2010 IN THE CASE OF NEW STUDENTS, FIRST-TIME APPLICANTS, CONTINUING AND RETURNING STUDENTS. APPLICATIONS RECEIVED AFTER THIS DATE MAY BE CONSIDERED ONLY AFTER ALL APPLICATIONS RECEIVED ON TIME HAVE BEEN CONSIDERED AND AID AWARDED.

- Relevant Completed Application Form
- Proof of Citizenship, or Spouse's Citizenship
- Financial Resources Documentation Required for Estimated Family Contribution & Student Contribution (see Section 7 for details)

Read and complete all required sections of the application starting on the next page.

SECTION 1: PERSONAL INFORMATION

THIS SECTION PROVIDES YOUR PERSONAL INFORMATION AND ALSO DETERMINES IF YOU ARE ELIGIBLE TO APPLY FOR FINANCIAL AID. PLEASE PROVIDE DOCUMENTS IN SUPPORT OF YOUR CITIZENSHIP CLAIM, OR THAT OF YOUR SPOUSE OR THAT OF YOUR PARENT.

Last Name		First Name		Middle	
Street Address	P. O Box #	City or Settlement	Island	Country	
Home Phone:	Mobile Phone:	College Email Address: Note: All official college correspondence will be through your College email address.		COB Student No.:	
Last High School Attended:			Date:		
Campus Attending or Applied to:					
New Providence <input type="checkbox"/>					
Grand Bahama <input type="checkbox"/>					
Are you a Bahamian citizen?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you married to a Bahamian citizen?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you the child under 25 of a Bahamian citizen?				YES <input type="checkbox"/>	NO <input type="checkbox"/>

SECTION 2: ENROLMENT STATUS

THIS SECTION DETERMINES YOUR ELIGIBILITY TO RECEIVE FINANCIAL AID BASED ON YOUR ACCEPTANCE AND YOUR PLANNED ENROLMENT STATUS. FINANCIAL AID IS AVAILABLE ONLY TO FULL TIME UNDERGRADUATE DEGREE STUDENTS, WITH SOME EXCEPTIONS FOR COLLEGE PREP STUDENTS.

I have applied to COB and my acceptance confirmation is pending				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have been accepted into the College Preparatory Programme				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have been accepted into an Associate Degree Programme (60 credits in total)				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have been accepted into a Bachelor Degree Programme (120 to 150 credits in total)				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I plan to enroll in :	Fall 2010: YES <input type="checkbox"/> NO <input type="checkbox"/>	Spring 2011: YES <input type="checkbox"/> NO <input type="checkbox"/>	Summer 2011: YES <input type="checkbox"/> NO <input type="checkbox"/>		

SECTION 3: DEPENDENCY STATUS

THIS SECTION IS REQUIRED IN ORDER TO DETERMINE YOUR DEPENDENCY STATUS.

IF YOU ARE A DEPENDENT, YOU ARE REQUIRED TO PROVIDE THE FINANCIAL INFORMATION OF YOUR PARENT(S) AND/OR YOUR LEGAL FINANCIAL GUARDIAN(S). YOUR PARENT(S) AND/OR YOUR LEGAL FINANCIAL GUARDIAN(S) ARE EXPECTED TO MAKE A CONTRIBUTION TO THE COST OF YOUR EDUCATION AS CALCULATED BY A PERCENTAGE OF TOTAL HOUSEHOLD INCOME.

SIMILARLY, IF YOU ARE MARRIED, YOU MUST PROVIDE FINANCIAL INFORMATION FOR YOUR SPOUSE.

ALL APPLICANTS, WHETHER DEPENDENT OR INDEPENDENT, MUST PROVIDE COMPLETE INFORMATION ABOUT THEIR OWN FINANCIAL SITUATION.

I turned 25 years of age before January 1 of this year.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I am married.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have children, biological or adoptive, who receive more than half of their support from me.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have dependents, who currently live with me, other than my biological/adoptive children or spouse, and who receive more than half of their support from me.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I am an emancipated minor as determined by a court of law.				YES <input type="checkbox"/>	NO <input type="checkbox"/>
I live independently and am supported only by my own resources and my own earnings.				YES <input type="checkbox"/>	NO <input type="checkbox"/>

SECTION 4

IF YOU ANSWERED 'NO' TO ALL QUESTIONS IN SECTION 3, COMPLETE ALL SECTIONS THAT FOLLOW.

IF YOU ANSWERED 'YES' TO ANY OF THE QUESTIONS IN SECTION 3, SKIP SECTION 4 THEN COMPLETE ALL SECTIONS THAT FOLLOW.

ALL INFORMATION IN THIS SECTION MUST BE ACCURATE AND MUST BE ACCOMPANIED BY VERIFICATION DOCUMENTS AS LISTED IN THE APPLICATION CHECKLIST.

THE RESPONSES TO THIS SECTION WILL DETERMINE WHAT AMOUNT OF FUNDING WILL BE REQUIRED OF YOUR FAMILY TO CONTRIBUTE TOWARDS YOUR EXPENSES TO ATTEND THE COLLEGE.

THE RATE AND PERCENTAGE OF HOUSEHOLD INCOME REQUIRED FOR YOUR FAMILY'S CONTRIBUTION VARIES ON THE LEVEL OF HOUSEHOLD INCOME AVAILABLE.

FATHER/ STEPFATHER/ MALE GUARDIAN INFORMATION	I receive no support from my father, stepfather or male guardian <input type="checkbox"/>	MOTHER/STEPMOTHER FEMALE GUARDIAN INFORMATION	I receive no support from my mother, stepmother or female guardian <input type="checkbox"/>
<i>Name</i>	<i>Relationship</i>	<i>Name</i>	<i>Relationship</i>
<i>Occupation/Job Title</i>	<i>Employer</i>	<i>Occupation/Job Title</i>	<i>Employer</i>
REVENUES: LIST REVENUE FOR EACH CATEGORY	<i>Current Salary (Annual)</i>	REVENUES: LIST REVENUE FOR EACH CATEGORY	<i>Current Salary (Annual)</i>
	<i>Gratuities/Commission (Annual)</i>		<i>Gratuities/Commission (Annual)</i>
	<i>Bonus (Annual)</i>		<i>Bonus (Annual)</i>
	<i>Investment Income (Annual)</i>		<i>Investment Income (Annual)</i>
	<i>Income from Rental Properties (Annual)</i>		<i>Income from Rental Properties (Annual)</i>
	<i>Alimony (Annual)</i>		<i>Alimony (Annual)</i>
	<i>Child Support (Annual)</i>		<i>Child Support (Annual)</i>
TOTAL ANNUAL REVENUE		TOTAL ANNUAL REVENUE	
SAVINGS & ASSETS LIST VALUE	<i>Total Savings & Assets</i>	SAVINGS & ASSETS LIST VALUE	<i>Total Savings & Assets</i>

SECTION 5: FAMILY HOUSEHOLD INFORMATION

DEPENDENT APPLICANTS MUST FILL OUT SECTION 5 IN ORDER FOR THE TOTAL AVAILABLE FINANCIAL RESOURCES TO BE ASSESSED WHEN MEASURING THE PACKAGE OF AID YOU MAY RECEIVE.

ALL INFORMATION IN THIS PACKAGE MUST BE ACCURATE AND MUST BE ACCOMPANIED BY VERIFICATION DOCUMENTS AS LISTED IN THE APPLICATION CHECK LIST.

THE RESPONSES TO THIS SECTION WILL DETERMINE WHAT AMOUNT OF FUNDING WILL BE REQUIRED OF YOUR FAMILY TO CONTRIBUTE TOWARD YOUR EXPENSES TO ATTEND THE COLLEGE.

YOUR FAMILY HOUSEHOLD INFORMATION IS REQUIRED TO DETERMINE FACTORS WHICH MAY IMPACT THE AMOUNT OF AID YOU QUALIFY TO RECEIVE BASED ON THE NUMBER OF PEOPLE YOUR HOUSEHOLD INCOME SUPPORTS AND ON OTHER CIRCUMSTANCES AS LISTED BELOW.

I live with my parents or other legal/financial guardian.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
My parents/financial guardians live in the same household as each other.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I live with a single parent/guardian.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Number of people living in my household, including me:	<i>Total number of people in household:</i>	
Number of people in my household currently attending College or other post-secondary education full-time (including me):	<i>Total number of people in household enrolled in post-secondary studies:</i>	
My household has incurred major medical expense for one of its members: <i>IF YOU ANSWER YES TO THIS QUESTION AND WISH THIS TO BE TAKEN INTO CONSIDERATION IN THIS APPLICATION, YOU MUST PROVIDE SUPPORTING DOCUMENTATION AND ATTACH IT TO THE APPLICATION.</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>

My household has suffered a major natural disaster in the last 12 months (fire, hurricane, other destruction).
 IF YOU ANSWER YES TO THIS QUESTION AND WISH THIS TO BE TAKEN INTO CONSIDERATION IN THIS APPLICATION,
 YOU MUST PROVIDE SUPPORTING DOCUMENTATION AND ATTACH IT TO THE APPLICATION.

YES

NO

SECTION 6: ESTIMATED APPLICANT CONTRIBUTION

ALL APPLICANTS MUST FILL OUT SECTION 6.

IN THE CASE OF INDEPENDENT APPLICANTS YOUR HOUSEHOLD INCOME AND LEVEL OF CONTRIBUTION REQUIRED TOWARDS YOUR EDUCATION WILL BE ASSESSED BASED ON THE INFORMATION YOU COMPLETE IN THIS SECTION.

IN THE CASE OF DEPENDENT APPLICANTS, YOUR LEVEL OF FINANCIAL RESOURCES WILL ALSO BE ASSESSED IN ADDITION TO YOUR FAMILY'S CONTRIBUTION, AND A FLAT CONTRIBUTION OF 5% OF YOUR TOTAL INCOME AND SAVINGS WILL BE REQUIRED AS CONTRIBUTION TOWARDS PAYING FOR YOUR EDUCATION AT THE COLLEGE.

ALL OTHER FINANCIAL RESOURCES AVAILABLE TO YOU TO ATTEND THE COLLEGE MUST ALSO BE DECLARED.

THIS INCLUDES ALL AWARDS, SCHOLARSHIPS, GRANTS AND LOANS, WHETHER PRIVATE OR GOVERNMENT, THAT YOU HAVE EITHER APPLIED FOR OR ALREADY RECEIVED.

FALSE DECLARATION IN THIS OR ANY OTHER SECTION OF THE APPLICATION WILL RESULT IN THE FORFEITURE OF YOUR FINANCIAL AID.

IF YOU DO HAVE ACCESS TO OR HAVE NOT APPLIED FOR OTHER RESOURCES TO ATTEND THE COLLEGE, YOU MUST DECLARE THE REASONS FOR THIS IN THIS SECTION.

EMPLOYMENT	<i>Current Salary (Annual)</i>
<i>Employer</i>	<i>Gratuities/Commission (Annual)</i>
<i>Job Title</i>	<i>Bonus (Annual)</i>
ANNUAL INVESTMENT INCOME	<i>Annual Rental Income</i>
	<i>Other Investment Revenue</i>
ANNUAL ALIMONY & CHILD SUPPORT INCOME	<i>Alimony</i>
	<i>Child Support</i>
TOTAL ANNUAL INCOME	<i>Total</i>
SAVINGS	<i>Savings in \$</i>

FINANCIAL AID & AWARDS

THE COLLEGE EXPECTS STUDENTS SEEKING FINANCIAL AID TO MAKE EVERY EFFORT TO SECURE ALL POSSIBLE FINANCIAL AID RESOURCES AVAILABLE TO THEM. LIST ALL FINANCIAL ASSISTANCE SOURCES FOR WHICH YOU HAVE APPLIED, WHETHER THESE ARE FROM PUBLIC OR PRIVATE SOURCES AND WHETHER THEY CONSTITUTE LOANS OR AWARDS. INDICATE WHETHER THE APPLICATION IS PENDING OR WHETHER IT HAS BEEN GRANTED. IF YOU HAVE NOT APPLIED FOR ANY AID, PLEASE PROVIDE AN EXPLANATION IN THE SPACE PROVIDED BELOW.

NAME OF THE FINANCIAL ASSISTANCE (E.G. CITY MARKETS FOUNDATION)	VALUE OF THE FINANCIAL ASSISTANCE (\$)	APPLICATION IN PROGRESS	APPLICATION GRANTED	APPLICATION DENIED
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have not applied or been granted any financial aid from any other source for the following reasons: _____

SECTION 7: DECLARATION OF TRUE STATEMENT

THIS SECTION REQUIRES YOUR SIGNATURE, AND IN THE CASE OF DEPENDENT APPLICANTS THE SIGNATURES OF GUARDIANS.

I HAVE ATTACHED THE FOLLOWING DOCUMENTS IN SUPPORT OF THE INFORMATION INCLUDED IN THIS APPLICATION:

Check Documents Provided

- PROOF OF CITIZENSHIP, SPOUSE OR PARENT CITIZENSHIP**
- FINANCIAL RESOURCES DOCUMENTATION REQUIRED FOR FATHER/MALE GUARDIAN** **N/A**
 - Salary Letter from Employer & Pay Stub
 - Gratuities/Commission Letter from Employer
 - Bonus Letter from Employer
 - Investment Income Bank Statement & Letter from Bank
 - Rental Income Bank Statement & Letter from Bank
 - Alimony Bank Statement & Letter from Attorney
 - Child Support Bank Statement & Letter from Attorney
 - Savings & Assets Bank Statement & Letter from Attorney or Bank
 - Loans Letter from Bank
- FINANCIAL RESOURCES DOCUMENTATION REQUIRED FOR MOTHER/FEMALE GUARDIAN** **N/A**
 - Salary Letter from Employer & Pay Stub
 - Gratuities/Commission Letter from Employer
 - Bonus Letter from Employer
 - Investment Income Bank Statement & Letter from Bank
 - Rental Income Bank Statement & Letter from Bank
 - Alimony Bank Statement & Letter from Attorney
 - Child Support Bank Statement & Letter from Attorney
 - Savings & Assets Bank Statement & Letter from Attorney or Bank
 - Loans Letter from Bank
- FINANCIAL RESOURCES DOCUMENTATION REQUIRED FOR SPOUSE** **N/A**
 - Salary Letter from Employer & Pay Stub
 - Gratuities/Commission Letter from Employer
 - Bonus Letter from Employer
 - Investment Income Bank Statement & Letter from Bank
 - Rental Income Bank Statement & Letter from Bank
 - Alimony Bank Statement & Letter from Attorney
 - Child Support Bank Statement & Letter from Attorney
 - Savings & Assets Bank Statement & Letter from Attorney or Bank
 - Loans Letter from Bank
- APPLICANT FINANCIAL RESOURCES DOCUMENTATION**
 - Salary Letter from Employer & Pay Stub
 - Gratuities/Commission Letter from Employer
 - Bonus Letter from Employer
 - Investment Income Bank Statement & Letter from Bank
 - Rental Income Bank Statement & Letter from Bank
 - Alimony Bank Statement & Letter from Attorney
 - Child Support Bank Statement & Letter from Attorney
 - Savings & Assets Bank Statement & Letter from Attorney or Bank

- Loans Letter from Bank
- Internships/Research Grants Letter from internship provider or granting agency
- Other Grants, Awards Scholarships Letter from granting agency

I DECLARE THAT THE INFORMATION DISCLOSED WITHIN THIS APPLICATION IS TRUTHFUL AND ACCURATE. I ACKNOWLEDGE THAT PROVIDING ANY FALSE AND/OR INACCURATE INFORMATION WILL RESULT IN THE FORFEITURE OF ANY FINANCIAL AID GRANTED BY THE COLLEGE OF THE BAHAMAS.

<i>Applicant Signature</i>	<i>Date</i>
<i>Parental/Guardian Signature (to be provided in the case of a dependent applicant)</i>	<i>Date</i>
<i>Parental/Guardian Signature (to be provided in the case of a dependent applicant)</i>	<i>Date</i>