

LAST NAME _____ FIRST NAME _____
SOCIAL SECURITY NUMBER _____ ANDREWS UNIVERSITY ID NUMBER _____
STUDENT'S EMAIL ADDRESS _____ TELEPHONE/MOBILE _____

IMPORTANT! Please Read Carefully. Filing on time is very important

> Where will you live?

NAME _____

ID/LAST 4 DIGITS OF SSN _____

External Resources: Will you receive non-AU or non-government resources during 16-17 for college costs? Please list them:

_____ / amount \$ _____

Professional Judgment Request: Undergraduates-If there are special