

Financial Need Scholarship Application

App	licant	Instr	uctions:
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Complete lines 1-6 of this form. Once completed, the bottom portion of this form will need to be completed by a financial aid administrator at your home campus. It remains the responsibility of the student to follow-up with the home campus financial aid office to assure that this application is submitted prior to the scholarship deadline.

Eligibility: To receive full consideration, applicants must have submitted a completed application for a qualifying CEA study abroad program. Candidates must be confirmed in their program by the review date (within one month of submitting their materials), or the award will be forfeited. Cumulative GPA requirement: 2.5. Please see the CEA website for additional criteria for all scholarships.

All items must be received by the following

dates: Summer: April 10 Fall: May 10 Spring: November 15

Student &
Program
Information
Completed by
student

Information

1	Last Name:	First Name:	iddle Initial:			
2	Home Institution:					
3	Program Location: Select Location	Program Title:	Term: Select Term			
4	Length of program:	(summer/short term p	rograms only):			
5	CEA Program price:					
6	Signature (typed):					
**B	**By signing above, I authorize my home institution to release my financial information to CEA.					

Financial Aid Administrator Instructions:

Please answer the questions below using information provided from the student, along with any additional information such as the most recent Free Application for Federal Student Aid (FAFSA) and Student Aid Report (SAR) that you may have on file. Once completed, please return a copy of this form to the student. The student will be required to submit this completed document along with other application materials by the deadlines listed above. Please direct any questions you may have to Academics@ceastudyabroad.com.

*If a FAFSA and SAR is not on file for the student, or if the student is ineligible to receive aid while abroad, please attach a letter on

university letterhead explaining the circumstances.								
Financial Aid Information To be completed by Financial Aid Office of Student's Home Institution	7	What is the Estimated Family Contribution (EFC) for this student:						
	8	Which of the following options will the student be eligible to use towards their CEA program? Please specify type of award, and total of awards for each category the student is eligible for: Grants (not including loans) type(s): total dollar amount: Institutional Aid type(s): total dollar amount: Loans type(s): total dollar amount: Other (please specify) type(s): total dollar amount:						
	9	Does the student receive Work-Study aid? Select Yes or No If so, please list the amount the student will forfeit during their term abroad						
	10	What is the total cost that will be billed to this student for participating in this program: CEA Program fee only CEA Program fee plus home institution tuition and/or administrative fee Home Institution tuition & fee's only Other (please specify):						
Financial Aid	13	Name:	Title:	Email Address:				
Administrator	14	Signature (typed):						