

Post-Baccalaureate Pre-Medicine Program 24-25 Fall/Spring Financial Aid Request Form

PRIORITY DEADLINE: May 01, 2024

FAFSA NOTES: This form is for students in the Post Baccalaureate Pre-Medicine Program. You will need to submit the 2024-2025 FAFSA on studentaid.gov with **School Code E00197**. All program forms, required by the Office of Financial Aid must be submitted using this **secure link**: https://gwu.app.box.com/f/f5e4a56069094f2bb3bca15f6e9708a3 . Please only submit via email if you have issues with the secure link to medfinan@gwu.edu in password protected PDF format, with the password emailed separately.

NameGW Student ID Number				
Date of Birth	Telephone	GW Email Address		
Permanent Address				
Local Address				
Housing status:	off campus w	vith parent(s)		
I will graduate on	(MM/YY)			
	ederal Direct Student Loa and/or my parents (if de _l	ns. I will complete the 2024-2025 FAFSA with my information and that of pendent)		
	or continuing undergradu ibility, how do you plan t	uate students have annual limits. Once you have been awarded your to pay?		
Self- Pay with sa	vings, education funds, 52	29 plan, or other outside funds		
Private alternat	• •	s option, you will apply directly to a private loan lender using school		
I am a dependent studentaid.gov	• •	arents/guardians will apply for a Parent PLUS Loan through		
I have other outside fir	nancial resources:			
		vill receive for the 2024-2025 academic year. (Include any ee tuition benefits, other tuition reimbursements, etc.)		
Source		Amount \$		

Certification:

You must be registered at least half-time, and eligible to attend classes, for any term for which you are applying for federal loans and/or institutional need-based aid. You may only receive funding to cover the cost of attendance. The cost of attendance may be viewed on our website in the Application section. You must re-apply every year in which you wish to be considered for financial aid.

I certify that I have not borrowed in excess of the loan limits under Tile IV programs at any institution and that the information I have provided on this form is true and complete. I agree to notify the GW SMHS Office of Financial Aid of any changes to my information. I understand that my aid package is subject to change and will be adjusted if I fail to maintain satisfactory academic progress. In addition, I have read this form in its entirety, and I understand and agree to all rules, regulations, and requirements.

Student Signature (Please use an Adobe Certified signature if a hand signature is not possible.)	Date	

PLEASE NOTE: pre-printed information in this form is accurate at the time of publishing. Subsequent changes in federal regulations or university policy may occur at any time, and may change application requirements or program guidelines. This form helps establish your eligibility for student aid funds. Making intentionally false statements or misrepresentations may have legal implications, and may eliminate you from future consideration for assistance from the George Washington University. Documents submitted in support of your application will be used solely to determine eligibility for financial assistance and cannot be returned.

The George Washington University does not unlawfully discriminate against any person on any basis prohibited by federal law, the District of Columbia Human Rights Act, or other applicable law, including without limitation, race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, or gender identity or expression. This policy covers all programs, services, policies, and procedures of the university, including admission to education programs and employment.

Inquiries concerning this policy and federal and local laws and regulations concerning discrimination in education and employment programs and activities may be directed to the university's Office of Equal Employment Opportunity and Affirmative Action, 2013 H Street, NW, 3rd Flr Washington, DC 20006, 202-994-9656, eeo@gwu.edu. Inquiries may also be directed to the US Department of Education Office for Civil Rights, the US Equal Employment Opportunity Commission, or the applicable state or local agency (for example, the District of Columbia Office of Human Rights).

Questions regarding protections against discrimination on the basis of sex may be directed to the university's Title IX Coordinator, the Vice Provost for Diversity and Inclusion, Building YY, 812 20th St. NW, Washington, DC 20052, 202-994-7434.

Questions regarding the protections against discrimination on the basis of disability may be directed to the university's Disability Services Coordinators. Students may contact the Associate Dean of Students, Administrative Services, Office of the Dean of Students, 1918 F St. NW, Washington, DC 20052, 202-994-6710, and other members of the university community may contact the Executive Director of Equal Employment Opportunity and Affirmative Action, 2013 H Street, NW, 3rd Flr Washington, DC 20006, 202-994-9656, eeo@gwu.edu.

To request disability accommodations, students should contact the Office of Disability Support Services, Rome Hall, 801 22nd Street, NW Suite 102, Washington, DC 20052 at 202-994-8250 or dss@gwu.edu. Employees and other members of the university community should contact the Office of Equal Employment Opportunity and Affirmative Action at 202-994-9656 or eeo@gwu.edu

Security Information: GW is committed to assisting all members of the GW community in providing for their own safety and security. Information regarding campus security and personal safety including crime prevention, university police enforcement authority, crime reporting policies, crime statistics for the most recent three-year period, and disciplinary procedures is available at https://police.gwu.edu/annual-security-fire-safety-report. To obtain a booklet containing this information, please contact: University Police Department; The George Washington University; 2145 G Street, NW or by calling (202) 994-2344.