

Last Name

First Name

M.I.

CB FinAid ID #



Trinity College
HARTFORD CONNECTICUT

**TC Aid Application
2018-2019**

Financial Aid Office

Upload or mail this completed form along with parent 2016 federal tax returns and W-2 statements to the College Board Institutional Documentation Service (IDOC) by our posted financial aid renewal deadline. Additional information about IDOC is available at <https://idoc.collegeboard.com>.

I. Housing: Where do you plan to live during the 2018-2019 academic year?

- Fall 2018: On Campus Study Away Off Campus With Parents/Relatives
- Spring 2019: On Campus Study Away Off Campus With Parents/Relatives

II. Anticipated Graduation Date: When do you expect to graduate from Trinity College? _____ / _____
month year

III. Outside Scholarships: List all outside scholarships and employer tuition benefits you expect to receive in the 2018-2019 academic year:

<i>Scholarship Source / Employer Tuition Benefit</i>	<i>Annual Amount Expected</i>
_____	\$ _____
_____	\$ _____
_____	\$ _____

IV. Sibling Education:

A. List all of your siblings who will be enrolled in an undergraduate or graduate degree program at least half-time in the 2018-2019 academic year:

<i>Sibling Name</i>	<i>Enrollment:</i>		<i>Institution</i>	<i>Degree Program:</i>		<i>Anticipated Graduation Date</i>
	<i>Full-time</i>	<i>Half-time</i>		<i>Undergraduate</i>	<i>Graduate</i>	
_____	<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"/>	_____

B. List all of your siblings who will be enrolled in a private elementary or secondary school in the 2018-2019 academic year:

<i>Sibling Name</i>	<i>Year in School</i>	<i>Institution</i>	<i>Annual Tuition Paid</i>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

V. Certification & Signature: By signing this form, I certify that all the information reported on it is complete and correct.

Student Signature (must be handwritten)

Date