



2020-2021 Trinity College Financial Aid IDP Application

For students enrolled in the IDP Program only.

Section I: Student Information

Student's Name _____ Trinity ID# _____

Address: _____
Street City State Zip

Telephone: () _____ Email: _____

(Your contact information should reflect where you can be reached during the review process)

Section II: Housing Information

Where do you plan to live during the upcoming 2020-2021 academic school year? Please select one for each term:

Fall 2020: Off Campus (with Spouse/Roommate) With Parents/Relatives Other (please detail below)

Spring 2021: Off Campus (with Spouse/Roommate) With Parents/Relatives Other (please detail below)

Housing Details:

Section III: Academic Information

1. Anticipated Credit Load: _____ Fall _____ Spring _____ Summer

Please list the number of credits above for each semester.

2. Expected Graduation Date: _____

Please list the month and year above.

Section IV: Financial Information

3. Amount you and/or your family intend to contribute towards your College costs: \$ _____

4. Outside Resource Information: List all private resources including scholarships and employer tuition benefits you expect to receive in 2020-2021:

Resource Provider:

Annual Amount:

Section V: Certification & Signature

I certify that all the information provided on this form is true and complete to the best of my knowledge.

Student Signature: _____ Date: _____