Application for Financial Aid

Please note that a student has the majority responsibility for his or her educational and living expenses. Aid awarded by RPTS is intended to augment the student's efforts.

Name	Email	
Financial Data		
Mortgage debt	Education debt	Other debt
Available savings	Monthly income (after taxes)	
Monthly expenses (housing/utilities/childcare/tra	avel/medical/contributions/recreation)	
Will you apply for a student loan?	Amount	
Do you have outside scholarships/gifts?	Amount	
Do you have VA benefits?	Type	
Amount of assistance from your church	(congregation/denomination)	
Other sources of income and amounts		
Academic Data (Please indicate the number of credit hours y	ou plan to take during the quarters fo	or which you are seeking aid)
Fall: Winter: Is there a particular RPTS scholarsh	Spring:	Summer:
Undergraduate GPA (for considerate	ion of merit scholarships)	
Awards granted will apply the whole time you available. You are responsible to notify the financial aid. All students receiving aid will Student Signature	Financial Aid Office immediately of be required to write letters of apprec	any changes that may affect your iation. (Details will be provided.)
If you have any questions, please		, it is an issue with your browser; the form ailed to the address shown below. s.edu or 412-731-3000).
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	Office Use Only	
Amount of financial aid awarded \$	or%	
Additional notes		Signature
		Date