

FINANCIAL AID DISCLOSURE FORM

Please sign this form and attach it to your Mini-Fellowship application.

PERMISSION STATEMENT

By applying for these funds, gives permission for the Financial Aid Office staff to release my need level as <u>high</u>, <u>medium</u>, or <u>low</u> to the Theater Department for the sole purpose of determining eligibility of the Theater Department's Mini-Fellowship funding.

Signature of Student

Date

NetID

* This form will be sent to the Office of Financial Aid. Your level of financial need will be kept strictly confidential.