

## **EITW College Financial Information Request Form**

I give my permission to: (name and complete address of college):

to release the following information to the non-profit foundation that awards scholar Groveport, Ohio.		is the Way Scholarship Foundation, a ort Madison Local School District located in
Name of Student:		
Signature of Student:		
Signature of Parent (if under 18)		
	For Financial Aid Office Use	Only
Academic Year:		
Total Cost of Attendance (including room	n and board, fees, books, etc): \$_	
List all current financial aid:		
Eligible Financial Aid	Yearly Amount	Status: Accepted/Rejected/Pending
	\$	
	\$	
	\$	
	\$	
	\$	

COLLEGE FINANCIAL AID DEPARTMENT: Please forward this information to Kathy Weiser, Executive Director of *Education Is the Way* @ <a href="mailto:kweiser27@gmail.com">kweiser27@gmail.com</a> or PO Box 452 Groveport, Ohio 43125 at your earliest convenience. Feel free to call 614-315-9425 with questions.