2020-2021 <u>RETURNING STUDENT</u> AHCT Financial Assistance Application

Name:	
Address:	
City/State/Zip:	
Telephone:	
Email:	
University:	
Degree Pursuing:	
Anticipated year of graduation:	

Financial Worksheet:

Annual Tuition:	
Housing Cost (if applicable):	
Misc. Cost (Computer, etc.):	
LESS Other Financial Aid/	
Scholarships	
LESS Personal Funds/Loans:	
NET ANNUAL Amount Needed:	
Amount Requesting from AHCT:	

Check List: Please submit the following:

____ Application and Financial Worksheet

____ Transcript

____ Proof of Registration

_____Brief essay (no more than 1 page) on your college experience last semester/year. (please include Name, University and Year (i.e. Junior) as of 9/1 in header)

Submit by JUNE 19, 2020 by email or U.S. Mail:

AHCT c/o Susan Hanna, Executive Director 26 Riverside Terrace Blauvelt, NY 10913 2020-2021 <u>RETURNING STUDENT</u> AHCT Financial Assistance Application

Via Email: <u>Shanna@diplex.com</u>