



Student Data Form 2011-2012

Student ID: W000_____ Social Security #: _____ - _____ - _____
First Name: _____ MI: _____ Last Name: _____
Address: _____ Date of Birth: _____
City/State/ZIP: _____ Home Phone: _____
Cell Phone: _____ Email Address: _____

Semester you plan to start at WATC: **FALL 2011** (Aug – Dec) **SPRING 2012** (Jan – May) **SUMMER 2012** (June/July) **OR...**
 I'm already a student at WATC

Program you plan to enroll/are enrolled in: _____

Please check here if you **HAVE** received a bachelor's degree.

By signing this form, I certify that all of the information reported to qualify for Federal student aid is complete and correct.

Student signature _____ **Date** _____

Security/Information Release
******* Please see the reverse side of this form *******

Wichita Area Technical College
Financial Aid
4004 N. Webb Rd. Wichita, KS 67226
316-677-9400

If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

