

KAW NATION
EDUCATION DEPARTMENT
P.O. BOX 50
KAW CITY, OK 74641
TEL. #580/269-1186 FAX #580/269-2116 E-MAIL: khowe@kawnation.com

Kaw Nation Education Programs
Renewal application for continuing students for the **2008 spring semester**

Name: _____
(Last) (First) (Middle I.)

Address: _____
(Street) (City) (State) (Zip)

E-mail address: _____

Telephone #: _____ Social Security #: _____

Marital Status: Single _____ Married _____ Divorced _____ # in family _____

Date of Birth: _____ Age _____

College Attending: _____

Degree Expected: _____

College Classification: (circle one) Freshman Sophomore Junior Senior

*Credit hours earned: _____ Credit hours needed to graduate _____

Major: _____ Minor: _____

Are you receiving Pell? Yes ___ No ___

Have you re-applied for PELL this semester? Yes ___ No ___

If you have not re-applied for PELL for this semester, please remember to do so.

Are you currently working part-time? Yes ___ No ___

Please include a copy of your 2007 fall grades and a copy of your 2008 spring class schedule with your renewal application. These items are needed before grants are mailed to the financial aid office.

***This information should be accurate. Please check with your advisor or with student records.**