



POSTSECONDARY EDUCATIONAL GRATUITY PROGRAM 2009-10 RENEWAL INFORMATION REQUEST

Dear Student:

Pennsylvania Higher Education Assistance Agency (PHEAA) records indicate that you were eligible for consideration under the Postsecondary Educational Gratuity Program for the current academic year. If you plan to continue full-time enrollment during the upcoming academic year period (2009-10 Fall, Winter, Spring or Summer 2010 terms), please complete this form and return it to PHEAA by August 1, 2009. If you plan to attend a different school than the one currently attended, you must attach to this form a copy of the letter of admission to the new school. Both the form and the letter of admission, if applicable, must be returned to: Pennsylvania Higher Education Assistance Agency, Postsecondary Educational Gratuity Program, State Grant and Special Programs, P.O. Box 8114, Harrisburg, PA 17105-8114. To be considered for continued eligibility, you must also apply for state and federal grants and other available scholarships. Please contact the financial aid administrator at the school you plan to attend for assistance in applying for financial aid.

1. **STUDENT NAME**
LAST FIRST MI

2. **STREET ADDRESS** (Note - P.O. Box addresses must be accompanied by a street address)

CITY _____ **STATE** _____ **ZIP CODE** _____

3. **SOCIAL SECURITY NUMBER**

4. **DATE OF BIRTH**.....

5. **PERMANENT HOME TELEPHONE NUMBER**.....

6. **EMAIL ADDRESS**

7. **STATE OF LEGAL RESIDENCE** (State of legal residence is based on domicile, which is a person's true, fixed, and
permanent home, the place in which the person normally resides and to which the person intends to return whenever absent.)

8. **DATE YOU BECAME A LEGAL RESIDENT OF STATE IN ITEM #7**.....

9. **TYPE OF DEGREE PROGRAM:**
 Associate Degree Bachelor's Degree Graduate Studies

10. **DATE YOU EXPECT TO RECEIVE YOUR DEGREE**.....

11. **COLLEGE YOU PLAN TO ATTEND** (See instructions and list of approved schools.)

Term	College Name	College Code	College City
Fall Term	_____	_____	_____
Winter Quarter	_____	_____	_____
Spring Term	_____	_____	_____
Summer Term	_____	_____	_____

12. EXPECTED ENROLLMENT STATUS: Check only one enrollment status for each term. (See definitions below.)

Beginning Date	Status	Fall Term	Winter Quarter	Spring Term	Summer Term
____/____/____	Not enrolled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	Full-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	Not full-time but at least half-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
____/____/____	Less than half-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STATEMENT OF CERTIFICATION OF AUTHORIZATION

By signing the Application for the Postsecondary Educational Gratuity Program, I/we hereby affirm that the signature below constitutes acceptance of the Statement of Certification of Authorization below, which is incorporated herein by reference and which I/we have read, understand, agree to and certify.

Signature of Student _____ Date _____
 Surviving Parent's Signature _____ Date _____

INSTRUCTIONS AND INFORMATION

ENROLLMENT STATUS (Question #12)

Provide the beginning date (month, day, year) and enrollment status for **each** term of enrollment planned.

FULL-TIME—12 credits or more per semester or the equivalent at a quarter school or clock hour institution.

HALF-TIME—6-11.9 credits per semester or the equivalent at a quarter school or clock hour institution.

LESS THAN HALF-TIME—Less than 6 credits per semester or the equivalent at a quarter school or clock hour institution.

PARENT'S SIGNATURE

If the surviving parent is not available to sign this application, please attach an explanation.

INFORMATION ON THE PRIVACY ACT AND USE OF YOUR SOCIAL SECURITY NUMBER

The Privacy Act of 1974 requires that each federal, state or local agency that asks for your social security number or other information must tell you the following:

1. The Agency's legal right to ask for the information and whether the law says you must give it;
2. What purpose the Agency has in asking for it and how it will be used; and
3. What could happen if you do not give it.

The number is needed to be sure we know who you are, to process your application, and to keep track of your record. We use your social security number in recording information about your college attendance; and in making sure that you have received the benefit of this waiver. If you do not give us your social security number, you will not receive aid under the Postsecondary Educational Gratuity Program (PEGP).

Pennsylvania PEGP applicants are hereby advised that disclosure of their social security number is a requirement and a condition for participation in the Postsecondary Educational Gratuity Program. The Agency, without such an identifier, would have difficulty in maintaining proper program records. Section 7(a)(2) of the Privacy Act provides that an agency may continue to require the disclosure of an individual's social security account number where the agency required this disclosure under statute or regulations prior to January 1, 1975, in order to verify the identity of the individual. Beginning in 1966 with Form S-1A-66 (First Application), applicants have been required to answer

all questions completely or face disqualification for grant assistance. All subsequent forms utilized by PHEAA contain the social security account number as the identifier of the applicant, including eligibility announcements forwarded to the student and the financial aid officer of the postsecondary institution.

STATEMENT OF CERTIFICATION OF AUTHORIZATION

By signing the application, I/we authorize PHEAA, for any year in which the applicant is considered for a PEGP gratuity, to make public announcement of any PEGP award or rejection for PEGP award made to the applicant; to investigate in any manner deemed appropriate by PHEAA, the eligibility of the applicant for tuition waiver under PEGP; to forward to the postsecondary institution(s) which the applicant listed or subsequently indicates that the applicant may attend and to others administering financial aid which may bear on eligibility under the application, all information on any application and all information subsequently submitted to or acquired by the Agency. I/we also authorize and direct other federal, state and local government agencies to release to PHEAA information in their possession which may bear on my eligibility under the application. I/we understand that all documents submitted to PHEAA become the property of PHEAA and cannot be returned. I/we declare under penalty of the criminal laws of the Commonwealth of Pennsylvania that the application has been examined by me/us and to the best of my knowledge and belief is a true, correct and complete application (see 24 P.S. §5158.1 and 18 P.S. §4904).

I, the applicant, authorize and direct the educational institution at which I am enrolled to release to PHEAA any records or other information in the possession of the institution or any of its officers or agents which relate to my record at their institution or bear upon my eligibility for the Postsecondary Educational Gratuity Program.

I, the applicant, understand that this gratuity, if awarded, cannot exceed unpaid charges by the institution for tuition, fees, room and board after state and federal grants and other scholarship funds are applied.

POSTSECONDARY EDUCATIONAL GRATUITY PROGRAM

APPROVED SCHOOLS

STATE-OWNED (State System of Higher Education)

011001 Bloomsburg University of Pennsylvania
011006 California University of Pennsylvania
011011 Cheyney University of Pennsylvania
011016 Clarion University of Pennsylvania
011021 East Stroudsburg University of Pennsylvania
011026 Edinboro University of Pennsylvania
011031 Indiana University of Pennsylvania
011036 Kutztown University of Pennsylvania
011041 Lock Haven University of Pennsylvania
011046 Mansfield University of Pennsylvania
011051 Millersville University of Pennsylvania
011056 Shippensburg University of Pennsylvania
011061 Slippery Rock University of Pennsylvania
011066 West Chester University of Pennsylvania

COMMUNITY COLLEGES

014009 Bucks County Community College
014010 Butler County Community College
014012 Pennsylvania Highlands Community College
Community College of Allegheny County:
014000 Allegheny Campus
014020 Boyce Campus
014022 Center North Campus
014021 South Campus
014026 Community College of Beaver County
014006 Community College of Philadelphia
014030 Delaware County Community College
014001 Harrisburg Area Community College
(All Campuses)
014028 Lehigh-Carbon Community College
014029 Luzerne County Community College
014005 Montgomery County Community College
014027 Northampton County Area Community College
014035 Reading Area Community College
014032 Westmoreland County Community College

TECHNICAL SCHOOLS

014039 Northwest Pennsylvania Technical Institute

STATE-RELATED

012026 Lincoln University
Pennsylvania State University:
012041 University Park (Main)
012081 Berks Lehigh Valley College (Allentown)
012082 Altoona Campus
012083 Beaver Campus
012084 Behrend Campus
012085 Berks Lehigh Valley College (Berks)
012080 Delaware County Campus
012086 DuBois Campus
012087 Fayette Campus
012099 Capital College (Harrisburg)
012088 Hazleton Campus
012089 McKeesport Campus
012090 Mont Alto Campus
012091 New Kensington Campus
012092 Abington College
012093 Capital College (Schuylkill)
012094 Worthington Scranton Campus
012095 Shenango Campus
012096 Wilkes-Barre Campus
012097 York Campus
012098 Pennsylvania College of Technology
University of Pittsburgh:
012071 Main Campus
012072 Bradford Campus
012073 Greensburg Campus
012074 Johnstown Campus
012075 Titusville Campus
012510 School of Dental Medicine
Temple University:
012061 Main Campus
012066 Pharmacy
012103 Allied Health Sciences & Nursing
012062 Ambler Campus
012069 Tyler Campus