



**STONY BROOK UNIVERSITY  
SCHOOL OF MEDICINE  
INSTITUTIONAL APPLICATION FOR FINANCIAL AID  
2012-13 ACADEMIC YEAR**

1. All students must file the **Free Application for Federal Student Aid (FAFSA)** or the FAFSA renewal form (available on-line for continuing students: [www.fafsa.ed.gov](http://www.fafsa.ed.gov)). **There is no deadline for submission for new students.** This information will be used for consideration in awarding campus based funds. When completing the FAFSA do not include parental information, unless you are applying for any institutional funds, such as the Disadvantaged Student Tuition Waiver, or any School of Medicine scholarship funds. Our Federal Code for the FAFSA is **002838-00**.
2. First year students and new financial aid applicants must complete this **Institutional Application for Financial Aid**; and a **Credit Policy Statement**.
3. You should have already submitted the **Citizen/Eligible Non-Citizen Verification Form** to the Office of Admissions, along with the required documentation.
4. If your application is selected for Quality Assurance verification, you will be required to submit Federal Tax forms, proof of untaxed income (if any) and other documents as requested. You will be notified in writing if you have been selected.
5. Certain programs may require that additional financial information be collected before awards are made. You must be prepared to submit this information if requested.
6. To facilitate loan processing and reduce the risk of lost paperwork, please make certain that your mailing address is accurate.
7. All students should have a clean credit history, as some loan programs will check the credit-worthiness of applicants prior to approval.
8. Stony Brook University participates in the Direct Lending Program for federal student loans (Stafford and Grad PLUS). All borrowers must complete an online Federal Direct Loan Master Promissory Note (MPN). The MPN can be completed at:

<https://studentloans.gov/myDirectLoan/index.action>

Stony Brook is listed under "State University of New York at Stony Brook"  
Federal Code: 002838-00

No financial aid will be awarded until applications and supporting documents are received. Send all forms to:

**Stony Brook University  
School of Medicine  
Office of Student Affairs  
HSC Level 4, Room 147  
Stony Brook, NY 11794  
631-444-2341  
e-mail: [mary.allen@stonybrookmedicine.edu](mailto:mary.allen@stonybrookmedicine.edu)  
[diane.piscitelli@stonybrookmedicine.edu](mailto:diane.piscitelli@stonybrookmedicine.edu)**

Academic Year 2012-13

Name \_\_\_\_\_ SB ID # \_\_\_\_\_

S.S. # \_\_\_\_\_ Class Year \_\_\_\_\_ Date of Birth \_\_\_\_\_

E-mail address: \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

Address for Correspondence \_\_\_\_\_

Telephone \_\_\_\_\_ State of Legal Residence \_\_\_\_\_

Citizenship \_\_\_\_\_ Type of Visa \_\_\_\_\_

Marital Status \_\_\_\_\_ # Dependent children living w/you \_\_\_\_\_

During the 2012-13 academic year do you plan to live:

\_\_\_\_\_ with parents; \_\_\_\_\_ on campus ( \_\_\_\_\_ dorms, \_\_\_\_\_ apartment complex):  
\_\_\_\_\_ apartment off campus, single; \_\_\_\_\_ apartment off campus, shared; \_\_\_\_\_ own home.

Monthly rent or mortgage payment: \_\_\_\_\_ Anticipated Specialty \_\_\_\_\_

Educational Level of Parent/Guardian: Father \_\_\_\_\_ Mother \_\_\_\_\_

Parent/Guardian Occupation: Father \_\_\_\_\_ Mother \_\_\_\_\_

Have you previously received financial aid (including loans)? \_\_\_\_\_

Please check the programs to which you are applying for the 2012-13 Academic Year:

Federal Direct Unsubsidized Stafford Loan \_\_\_\_\_

Federal Direct Grad PLUS \_\_\_\_\_

SUNY Disadvantaged Student Tuition Waiver  
(must complete Parents' Info Section of FAFSA) \_\_\_\_\_

Regents Health Care Scholarship \_\_\_\_\_

Other (including personal loans from family) \_\_\_\_\_

Name of institutions previously attended: \_\_\_\_\_

\_\_\_\_\_

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Have you received a National Direct or Perkins Loan at another institution? \_\_\_\_\_

Have you received a Pell Grant or SEOG at another institution? Please circle \_\_\_\_\_

Will you have use of a car? \_\_\_\_\_ Make/Model /Year \_\_\_\_\_

Value \_\_\_\_\_ Insurance Premium \_\_\_\_\_ Drivers License # \_\_\_\_\_

**Student's and Spouses' Indebtedness (include indebtedness of spouse-to-be):**

<b>Debt (lender and purpose)</b>	<b>Total Amount Borrowed</b>	<b>Amount to be repaid during 2012-13 Academic Year</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Educational Loans:</b>		
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>Total Educational Loans</b>	_____	_____
<b>Total Indebtedness</b>	_____	_____

**The State University of New York at Stony Brook does not discriminate on the basis of race, religion, sex, sexual preference, color, national origin, age, disability, marital status, or status as a disabled or Vietnam-era veteran in its educational programs or employment.**

**Discrimination is unlawful. If you are a student or an employee of SUNY at Stony Brook and you consider yourself to be a victim of illegal discrimination, you may file a grievance in writing with the Affirmative Action Office within forty five calendar days of the alleged discriminatory act. If you choose to file a complaint with the University, you do not lose your right to file with an outside enforcement agency such as the State Division of Human Rights or Equal Employment Opportunity Commission.**

**Signature \_\_\_\_\_ Date \_\_\_\_\_**