



ACHIEVE ENROLLMENT PROJECTION

LAST NAME	FIRST NAME	COHORT	SOCIAL SECURITY NUMBER
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- Completion of this form (along with the FAFSA annually) is required for the Financial Aid Office to compile your financial aid award.
- Students will be awarded aid on a semester by semester basis. To receive aid, you must complete and turn in a projection form at the time you enroll for classes each semester.
- If you add or drop a class, it is your responsibility to contact our office in writing immediately regarding your change in enrollment.
- Less than full-time (12 hours) enrollment will affect your eligibility for certain types of aid.

Please mark the semester for which you are requesting financial aid:

- _____ Spring 2007-2008
- _____ Fall 2008-2009
- _____ Spring 2008-2009
- _____ Fall 2009-2010

Class Prefix and #	#of Credits	If Online, what section? (OU, OW, etc.)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

STUDENT SIGNATURE

DATE

STUDENT COMMENTS:

Please return to:
Asbury College, Financial Aid Office
One Macklem Drive
Wilmore, KY 40390
Phone: 1-859-858-3511, x2195
Fax: 1-859-858-3921