

Office of Student Financial Assistance

FAMILY GRANT APPLICATION (2021 - 2022)

The CUA Family is awarded under the following conditions:

The family has two or more dependent children (As determined by the FAFSA) of the same household
Students are concurrently registered as full-time students (attempting a minimum of 12 credit hours) at The Catholic University of America

Pursuing their first undergraduate degrees

Students must be maintaining Satisfactory Academic Progress (SAP) to continue eligibility.

No student will be considered eligible for the Family Grant because he or she is married to a student or because of concurrent enrollment of a parent.

The Family Grant Application must be submitted before or during the semester in which the award is to be credited. Awards will not be processed after the last day of classes.

If the above conditions are met, the older sibling(s) is/are eligible for a CUA Family Grant of \$2,000 per year.

Important Notes:

- The Family Grant is only offered in the fall and spring semesters, no summer awards are available.
- Family Grants are credited equally to each semester; \$1,000 for Fall and \$1,000 for Spring.
- Retroactive requests after courses have ended will not be considered.

Please indicate the semesters for which you anticipate being eligible for a CUA Family Grant.

Semesters:	Fall & Spring	Fall Only	Spring Only
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Please complete the section below for each sibling that will be enrolled full-time towards their first undergraduate degree, if **at least two students** are not listed no award will be considered.

Student Name (please print)	Student CUA ID#	AGE
Sibling's Name (please print)	Student CUA ID#	AGE
Sibling's Name (please print)	Student CUA ID#	AGE
Sibling's Name (please print)	Student CUA ID#	AGE

I certify that all of the information provided on this form is true and complete to the best of my knowledge. I understand that my sibling(s) and my enrollment will be reviewed after the close of the add/drop period. I also understand that the CUA Family Grant will be canceled if my sibling(s) or my enrollment falls below full-time status.

Student Signature _____ Date _____

NOTE: Signature must be handwritten. Computer fonts are not acceptable.

Parent Signature _____ Date _____

NOTE: Signature must be handwritten. Computer fonts are not acceptable.

USE ONE OF THE FOLLOWING METHODS TO RETURN THIS FORM:

MAIL or IN PERSON	FAX	EMAIL
The Catholic University of America Father O'Connell Hall, Suite M300 620 Michigan Avenue, NE Washington, DC 20064	202-319-5573	CUA-FAFORMS@CUA.EDU