INSTRUCTIONS TO APPLICANTS

These instructions are for the Access to Higher Education Grant Program sponsored by the Government of Guam. The Board of Regents selects the recipients of this award on the basis of scholastic ability, residency, financial need, and aptitude. The Board may also use work or life-time experience and achievement criteria in place of the aptitude criterion, if through such experience, it can be reasonably determined that the applicant will succeed in a course of study.

Please read these instructions carefully. **IF YOUR APPLICATION AND SUPPORTING DOCUMENTS ARE LATE AND/OR INCOMPLETE, IT WILL NOT BE CONSIDERED FOR AWARDING.**

THE ACCESS TO HIGHER EDUCATION GRANT APPLICATION:
1. You must complete all sections and sign the application form. Please do not leave any section blank. If the section does not apply to you, please indicate with a "N/A" or "none".
2. You must have the application **NOTARIZED**. Please note that the Notary Public will require your signature in his/her presence and may require a fee.
3. You must submit the completed application form and all required documents to the Financial Aid Office, located at the University of Guam Field House, by **5:00 P.M. Friday, September 25, 2015**. **Applications submitted by mail must be postmarked on or before September 25, 2015.**

APPLICATION AND REQUIRED DOCUMENTS
Please complete the following sections on the application form attached. You must also submit the required documents to support the information given.

**SECTION 1: PERSONAL DATA**

[ ] You must provide **PROOF OF U.S. CITIZENSHIP or PERMANENT RESIDENT ALIEN** status:
   a) If you are claiming U.S. Citizenship, please submit a copy of your official birth certificate, U.S. Passport, or a copy of your naturalization certificate.
   b) If you are a permanent resident alien, please submit a copy of your alien registration card.

**SECTION 2: EDUCATIONAL DATA**

[ ] You must submit an **ACCEPTANCE LETTER**:
   a) If you are entering as a new student, you must submit a copy of your letter of acceptance from the University of Guam.

[ ] You must submit **OFFICIAL ACADEMIC TRANSCRIPTS** for all institutions attended.
   a) For new undergraduate students, you must submit your official transcript conferring your high school diploma.
   b) If you are currently attending the University of Guam, submit an official transcript from the University.

**SECTION 3: STATEMENT OF RESIDENCY**

[ ] You must submit **PROOF OF FOUR (4) YEAR GUAM RESIDENCY** by providing ANY of the following to satisfy the four year residency period. (Residency period of not less than four (4) years immediately preceding June 15th of the year award is to be given)
   a) A voter registration for elections certified by the Guam Election Commission.
   b) *Copies of filed income tax records stamped received by the Guam Department of Revenue and Taxation or Tax Transcripts provided by the Guam Department of Revenue and Taxation.
   c) *Proof of Recipient of Public Assistance on Guam through submission a certified statement indicating period of assistance from agencies providing the assistance.
ACCESS TO HIGHER EDUCATION GRANT PROGRAM

d) Official transcripts of all schools attended on Guam (public or private high schools, middle schools, elementary schools, etc.)
e) Bank statement of Mortgage on principal residence.
*Applicant must be listed on all documents submitted by parents or guardians.

ADDITIONAL DOCUMENTS REQUIRED

[ ] You must apply for the 2015-2016 FAFSA. You must include UOG Title IV Code 003935 in the School Selection section of the FAFSA. While students may mail completed FAFSA forms to USDOE, we encourage all students to apply online. The FAFSA can be accessed at www.fafsa.ed.gov. Upon completion of the FAFSA, you will receive a Student Aid Report (SAR). The SAR must be submitted to the Financial Aid Office, with this application to complete your file.

PRELIMINARY SCREENING AND SELECTION(S):

If your application with the above supporting documents is COMPLETE, it will be submitted to the Board of Regents Scholarship Committee for their recommendation. It will then be forwarded to the Board of Regents regular meeting for action. We will notify you in writing of the Board’s decision on your application (around September/October for the Academic Year of application). If approved, you will be required to attend a MANDATORY PRE-AWARD ORIENTATION prior to receiving the award benefits.

APPLICATION DEADLINE:  5:00 P.M. FRIDAY, SEPTEMBER 25, 2015

FOR ADDITIONAL INFORMATION, YOU MAY CONTACT OUR OFFICE AT: Telephone (671) 735-2288 or Fax (671) 734-2907. We can also be reached by e-mail at – sfap@uguam.uog.edu
Please use typewriter or block letters in ink. Submit the completed application to the Financial Aid Office, located at the University of Guam Field House on or before 5:00 P.M. FRIDAY, SEPTEMBER 25, 2015. LATE and INCOMPLETE applications and those without supporting documents WILL NOT be considered. Refer to INSTRUCTIONS TO APPLICANTS accompanying this application form.

SECTION 1: PERSONAL DATA

<table>
<thead>
<tr>
<th>APPLICANT’S NAME:</th>
<th>CITIZEN OF THE UNITED STATES:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAST</td>
<td>FIRST</td>
</tr>
<tr>
<td>UOG STUDENT ID NO.:</td>
<td></td>
</tr>
<tr>
<td>DATE OF BIRTH:</td>
<td>PLACE OF BIRTH:</td>
</tr>
<tr>
<td>SEX:</td>
<td>MARITAL STATUS:</td>
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<tr>
<td>PERMANENT HOME ADDRESS:</td>
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<td>MAILING ADDRESS:</td>
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</tr>
<tr>
<td>EMAIL ADDRESS:</td>
<td>FOR PERMANENT RESIDENT ALIENS:</td>
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<tr>
<td>PLACE OF RESIDENCE:</td>
<td>TELEPHONE NO.:</td>
</tr>
<tr>
<td>YOUR POSITION TITLE:</td>
<td></td>
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<tr>
<td>NAME OF EMPLOYER:</td>
<td>TELEPHONE NO.:</td>
</tr>
<tr>
<td>SPOUSE’S NAME:</td>
<td>SPOUSE’S OCCUPATION-EMPLOYER-WORK PHONE:</td>
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<tr>
<td>FATHER’S NAME:</td>
<td>FATHER’S OCCUPATION-EMPLOYER-WORK PHONE:</td>
</tr>
<tr>
<td>MOTHER’S NAME:</td>
<td>MOTHER’S OCCUPATION-EMPLOYER-WORK PHONE:</td>
</tr>
<tr>
<td>PARENT’S MAILING ADDRESS:</td>
<td>PARENT’S CONTACT NO.:</td>
</tr>
</tbody>
</table>

SECTION 2: EDUCATIONAL DATA

| □ BACHELORS | MAJOR PROGRAM: |
| ACCEPTED FOR ADMISSIONS TO: (Name, address of institution) | |
| DEGREE EXPECTED: | MONTH/YEAR EXPECTED: |
| STUDIES TO COMMENCE: (Circle One) | Fall Spring |
| \[ Semester \] | Quarterly Academic Year |
UNIVERSITY OF GUAM
FINANCIAL AID OFFICE
STUDENT FINANCIAL ASSISTANCE PROGRAM
ACADEMIC YEAR 2015-2016

Have you received Government Assisted Scholarship/Loan before this Academic Year? □ Yes □ No

If yes, (name of program)__________________________________________________________

When?__________________________________________________________

SECTION 3: STATEMENT OF RESIDENCY. (This section must be signed in the presence of a Notary Public)
I, ______________________________________, Social Security No. ____________________, do hereby declare that I am a:

☐ CITIZEN OF THE UNITED STATES
☐ PERMANENT RESIDENT ALIEN

Residing in __________________________, Island of Guam; that I was born in __________________________on
(Village) __________________________ (City, State) __________________________;
that I have resided in Guam since __________________________; that I intend to remain in and as
(Date of Birth) __________________________ (Date) __________________________;
a legal resident of Guam indefinitely; and that I am not a resident of any other territory or any state or foreign country.

PARENT’S OR GUARDIAN’S SIGNATURE ____________________________________________

DATE: __________________________  APPLICANT’S SIGNATURE ____________________________

SUBSCRIBED and sworn to before me on this ________ day of ________, 20______, at ________________.

NOTARY PUBLIC ____________________________

My commission expires on ____________________________

________________________________________

I hereby certify that the information I have given in this application and in the supporting documents are true and correct to the best of my
knowledge and belief. I agree to comply with all the regulations and laws that are applicable to the financial assistance, which may be
awarded to me by the Board of Regents.

APPLICANT’S SIGNATURE: ____________________________  DATE: ____________________________