

# Lake Sumter

COMMUNITY COLLEGE

OFFICE OF FINANCIAL ASSISTANCE  
9501 U.S. Highway 441, Leesburg, FL 34788 • 352-365-3567

## CHILD CARE FINANCIAL AID APPLICATION FORM

This form must be turned in with a completed Child Care Personal Data Form.  
Please complete this entire form. DO NOT leave anything blank. If there is notation telling you that documentation is required, it must be turned in with this application. THIS APPLICATION WILL NOT BE PROCESSED UNLESS REQUIRED DOCUMENTATION IS ATTACHED.

Student Name: \_\_\_\_\_  
Last First MI

Student Identification Number

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### ACADEMIC INFORMATION

My current major is: \_\_\_\_\_

Are you currently eligible for a Pell Grant?  Yes  No

I am taking \_\_\_\_\_ credit hours this term

I am presently receiving child care assistance through \_\_\_\_\_.

My expected graduation date is: \_\_\_\_\_

Attach a copy of your current detailed schedule, listing the name of the instructor for each and every course.

### FINANCIAL INFORMATION

Total number of people residing in your household \_\_\_\_\_.

Total Income for the household during the past tax year \$ \_\_\_\_\_.

I hereby state that all of the above is true and correct and that I have provided Lake-Sumter Community College with all the required documentation. I also realize that falsification or incorrect information given on this form or in the accompanying documentation will result in the application process being terminated.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date