



# 2023-2024 | Data Form

Student Financial Services • 1500 College Parkway • Elko, NV 89801 • Phone: (775) 327-2095  
FAX : (775) 327-5105 • WEB SITE: [www.gbcnv.edu/financial](http://www.gbcnv.edu/financial) • Email: [financial-aid@gbcnv.edu](mailto:financial-aid@gbcnv.edu)

Student Name:		Date of Birth:	Student ID	
Home Address	PO Box#	City	State	Zip Code
Cell Phone#	Work Phone:	Valid Email Address:		
INPUT DEGREE OBJECTIVE: (Do not leave blank.) Degree required to receive federal aid.				

## High School Completion Certification

**Note:** You may be asked to provide a copy of high school diploma, high school transcript, GED, or Accredited home schooling evidence.

Do you have a Standard High School Diploma? YES or NO **OR** Do you have a GED? Yes or No What year? \_\_\_\_\_  
 HS graduation date or Anticipated graduation date: \_\_\_\_\_ / \_\_\_\_\_ From: \_\_\_\_\_ State issued \_\_\_\_\_  
 Name of high school \_\_\_\_\_ Do you have an associate degree? YES or NO  
 Accredited Homeschooling? Yes or No Where? \_\_\_\_\_ \*\* If yes, appeal may be necessary.

I certify and understand that I must have a standard high school diploma or GED, **not an adjusted diploma or certificate of attendance** to receive federal financial aid. Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_

## Certification

Carefully read each statement and initial indicating that you understand  
You will be held accountable for the terms & conditions as a federal financial aid recipient.

### Please initial:

- \_\_\_\_\_ I authorize GBC to apply my **2023-24** awarded Title IV federal funds to any outstanding current (including Housing) and/or minor (less than \$25) prior year institutional charges incurred..
- \_\_\_\_\_ I must take classes that are applicable to my degree objective that I have on file with the Admissions & Records Office. **Federal financial aid will only pay for classes that are applicable toward my degree objective.**
- \_\_\_\_\_ Financial Aid will not pay for any remedial courses (i.e., courses below 095).
- \_\_\_\_\_ Financial Aid **will not cover Continuing Education courses, Excess Credit Fees, Late Fees, New Student Application Fee, and Housing Fees.**
- \_\_\_\_\_ **Repeated Class:** I understand that financial aid will pay for to repeat a class once if I retake for a better grade
- \_\_\_\_\_ If I do not reside in the GBC service area, and I am enrolled in **100% ONLINE** courses. I must submit **Progress Reports of substantial academic progress** in each class before any funds will be disbursed. (This applies only to the first semester of enrollment).
- \_\_\_\_\_ I **cannot** receive aid at two institutions during the same academic semester.
- \_\_\_\_\_ My financial aid **will be adjusted during the 100% refund period date** After the refund period date, it will not be adjusted **even if I enroll in a late starting class.**
- \_\_\_\_\_ I have read and understand the [Federal Satisfactory Academic Progress \(SAP\)](#) requirements that I must maintain as a federal financial aid recipient.
- \_\_\_\_\_ I must complete all courses I am funded for each semester. Failure to do so could result in suspension and/or owing money to the Department of Education and/or Great Basin College. **(REFER TO SAP)**
- \_\_\_\_\_ I will contact the Financial Aid Office before I drop/add any of my classes **before the 100% refund period date.** Any changes made after said date, **will affect my financial aid** and I may owe back funds to GBC or Dept. of Education.
- \_\_\_\_\_ If my federal aid has been delayed for any reason, **I am responsible to purchase my books, maintain reliable internet services, and set up a payment plan until my financial aid file is complete.**

**By signing this form,** I hereby certify that the information provided is true and correct to the best of my knowledge. If I purposely give false or misleading information to establish eligibility for Federal Financial Aid, I may be subject to **\$10,000 fine, prison sentence, or both.**

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_