

CSSAC Dependent and Employee/Spouse Grant Fund Application

Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Campus Department \_\_\_\_\_

Campus Address \_\_\_\_\_

Campus Phone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Return completed application materials by June 1st for Fall classes and November 1st for Spring classes to Human Resources, KT G56A

A new application for each semester will have to be provided.

This grant may affect your eligibility for tax credits for higher education. For more information visit the website at <http://www.ed.gov/inits/hope>

Find us on the web at <http://www.ipfw.edu/cssac>

WL WEB CSSAC home page address: <http://www.adpc.purdue.edu/hr/cssac/csachome.htm>