

**NAME** BROWN, DALLAS

- Application Complete
- FIMS
- Spreadsheet

**SAMUEL L. ABRAMS FOUNDATION  
DEADLINE MAY 31**

New Applicant    Re-applicant

**CHECKLIST:**

Graduated from one of the following schools:

- |  |  |
|--|--|
| <input type="checkbox"/> Bishop McDevitt   | <input type="checkbox"/> Middletown                            |
| <input type="checkbox"/> Camp Hill         | <input type="checkbox"/> Red Land                              |
| <input type="checkbox"/> Cedar Cliff       | <input type="checkbox"/> Sci-Tech                              |
| <input type="checkbox"/> CD East           | <input type="checkbox"/> Steel-High                            |
| <input type="checkbox"/> Central Dauphin   | <input type="checkbox"/> Susquehanna Township                  |
| <input type="checkbox"/> Cumberland Valley | <input type="checkbox"/> Susquenita                            |
| <input type="checkbox"/> Harrisburg        | <input type="checkbox"/> Harrisburg Academy                    |
| <input type="checkbox"/> Lower Dauphin     | <input type="checkbox"/> Rabbi David L. Silver Yeshiva Academy |
| <input type="checkbox"/> Mechanicsburg     | <input type="checkbox"/> Trinity                               |

Completed Application

Other Scholarship Information

Student Resume

FAFSA SAR EFC: 29083

Letter of Extenuating Circumstances

Essay

Tuition Bill

Financial Aid Information

Transcript GPA: \_\_\_\_\_

School Counselor Form (only if HS applicant)

**NOTES:**    DAUPHIN COUNTY TECHNICAL SCHOOL GRADUATE

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# Samuel L. Abrams Foundation Scholarship Application

## Applicant Information

Please use proper capitalization, i.e. John A. Smith, not JOHN A SMITH or john a smith

Prefix e.g., Mr., Miss, Ms., Mrs. Miss	First Name Dallas	Middle Initial O	Last Name Brown	Suffix e.g., Jr.
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Pronoun  
e.g., he, she, they  
she

Nickname or Preferred Name

Address 1 Street Address 324 Hamilton Street	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	County Dauphin County	State Pennsylvania	Zip Code 17102
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Phone  
XXX-XXX-XXXX  
7173192282

E-mail Address  
Please provide an e-mail address you will continue to check throughout the year  
Dallasobrown09@gmail.com

Date of Birth May 09, 2002	Gender Female	U.S. Citizen Yes
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Are you Married? No	Name of Spouse if applicable
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Number of Dependents and Age(s)  
if applicable

## Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

Father

Prefix e.g., Mr., Miss, Ms., Mrs. Mr	First Name Antoine	Middle Initial N	Last Name Brown
--	-----------------------	---------------------	--------------------

Pronoun

e.g., he, she, they  
he

Employer City Of Harrisburg	Occupation Communications
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Address 1 Home Address 324 Hamilton St	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	State PA	Zip 17102-1821
--------------------	-------------	-------------------

Home Phone xxx-xxx-xxxx 7178561399	Work Phone xxx-xxx-xxxx	Cell Phone xxx-xxx-xxxx
--	----------------------------	----------------------------

E-mail Address

Please provide an e-mail address that is checked regularly

Antoinenbrown88@yahoo.com

Parent 2 / Caregiver 2

Relationship to Applicant

Stepmother

Prefix e.g., Mr., Miss, Ms., Mrs. Mrs	First Name Debra	Middle Initial H	Last Name Brown
---	---------------------	---------------------	--------------------

Pronoun

e.g., he, she, they  
she

Employer Harmony Health Care	Occupation Health Care Consultant
---------------------------------	--------------------------------------

Address 1 Home Address 324 Hamilton St	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	State PA	Zip 17102-1821
--------------------	-------------	-------------------

Home Phone	Work Phone	Cell Phone
------------	------------	------------

XXX-XXX-XXXX  
7178560200

XXX-XXX-XXXX

XXX-XXX-XXXX

### E-mail Address

Please provide an e-mail address that is checked regularly

febtwin1972@yahoo.com

Father Deceased?

No

Mother Deceased?

Yes

Parents Divorced?

No

Are you the first in your family to attend college?

No

List names, ages, and educational levels of siblings living in your household:

Name, Age, Grade, or Year in College & Name of College

Please provide any additional information regarding your family, if necessary:

## High School Information

High School Attending

Dauphin County Technical School

High School Address 1

6001 Locust Lane

High School Address 2

City

Harrisburg

State

Pennsylvania

Zip Code

17102

High School Graduation Date

June 04, 2020

Cumulative GPA

3.6

Cumulative Class Rank

47

Total H.S. Class Size

247

Please provide your school counselor's name and contact information below.

Prefix

e.g., Mr., Miss, Ms., Mrs.

Mrs

First Name

Shelly

Last Name

Milbran

Phone

XXX-XXX-XXXX

7176523170

E-mail Address

Smilbran@dc-tech.org

## Post-Secondary Information & Educational Financing

Please list the colleges/universities to which you have applied and indicate your acceptance status.

College/University 1

Acceptance Status

Morgan State University	Yes
College/University 2	Acceptance Status
Alabama State University	Yes
College/University 3	Acceptance Status
Arkansas Baptist College	Yes

Year in college for upcoming school year  
Freshman

Major and minor field of study  
Business Administration

Check this box if you plan to be a full-time student.  
Yes

If you do not plan to be a full-time student,  
how many credit hours are you planning to take?

Expected College Graduation Date  
May 01, 2024

Please provide educational financing information for the school you will attend in the fall.  
If you are unsure of what school you will attend, please provide information for your first choice school.

**ALL DOLLAR FIGURES SHOULD REFLECT EXPENSES FOR ONE FULL ACADEMIC YEAR**

School  
Morgan State University

Expected Annual Tuition & Fees  
Total dollar figure for both fall & spring semesters  
18,167

Expected Annual Room & Board  
Total dollar figure for both fall & spring semesters  
11,677

Expected Annual Textbooks & Supplies  
Total dollar figure for both fall & spring semesters  
2,500

Where do you plan to live during the school year?  
Please indicate if you will be living in campus housing, commuting, living off campus etc.  
Campus housing

Are you financing your own education?  
No

How much of your education are you financing?  
dollar figure for one academic year

If no or partial, who is helping to finance your education?

How much of your education are they supporting per year?  
dollar figure for one academic year

Do you plan to take out student loans for the upcoming year?  
Loans include federal subsidized, unsubsidized, and private loans  
Yes

If yes, how much?  
dollar figure

Do you plan to have employment during the academic year?  
Employment includes participating in a work study program and private employment  
Yes

If yes, how many hours will you work per week? How  
much will you earn?  
Include hours and dollar figure  
20

Use the space below to describe how you will finance the total of your education and provide any clarification needed for the answers given above.  
I will finance the total of education by my parents, part time employment, federal aid, and possible other awarded scholarships.



OTHER SCHOLARSHIP INFORMATION

Please list all other scholarships you have applied for (attach an additional sheet of paper if more space is needed):

Table with 3 columns: Scholarship Name, Received (Yes/No/Pending), and Amount. Includes entries like Ron Brown SP, Delta Sigma Theta Sorority Sp, Alpha Kappa Alpha Soeority SP, DCTS Education Foundation SP, Norman P Hendrick SP, James Dewalt and Susan Ebersole SP, Richard and Sylvia Dodge SP, Sourbeer Family SP, The Civic Club Of Harrisburg, Ray Shoemaker Sp, Leon Lowengard Sp, and several blank rows.



## STUDENT RESUME

List any school, community, and faith-based activities in which you have been involved in the last four years and note if it was while in high school (HS) or college (C). Be sure to include leadership roles and number of hours (hours per week/month/year, whichever is applicable). Make additional copies of this page if more space is needed.

School Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
National Technical Honors Soc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	05/2019-06/2020	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	_____
National Honors Society	<input checked="" type="checkbox"/>	<input type="checkbox"/>	08/2019-06/2020	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Prom Committee	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12/2018-06/2019	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Senior Class Treasurer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	08/2019-06/2020	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	_____
Jouner Class Council	<input checked="" type="checkbox"/>	<input type="checkbox"/>	08/2018-06/2019	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Community & Faith-based Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
YMCA Teen Achievers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2016-2019	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30+hrs
Chris Franklin Turkey Giveaway	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2018	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	6hrs
Chris Franklin TG DinnerBasket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2019	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12hrs
AKA Soroity Park Cleanup	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2017-2020	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15+hrs
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Awards & Honors	HS	C	FR	SO	JR	SR	Year
Skills USA First Place Schools Competiton (COS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2019
Skills USA Third Place Districts Competiton (COS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2020
Distinguished Honors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2016/2020
Honor Roll	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2016-2020
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Work Experience		Average Hours	
Employer	Position	Dates of Employment	Worked Per Week
Christmas Tree Shops	Cashier	06/2019-04/2020	20hrs
Parks and Recreation	Camp Councilor	06/2018-08/2018	30hrs
_____	_____	_____	_____
_____	_____	_____	_____

## Processed Information

### 2020-2021 Electronic Student Aid Report (SAR)

The SAR summarizes the information you submitted on your 2020-2021 Free Application for Federal Student Aid (FAFSA).

Application Receipt Date: 11/05/2019	XXX-XX-9649 BR 01
Processed Date: 11/06/2019	EFC: 29083
	DRN: 2959

▼ Collapse All

#### ► Comments About Your Information

Learn about [federal tax benefits for education](#), including the *American Opportunity Tax Credit* (AOTC).

Based on the information we have on record for you, your EFC is 29083. You are not eligible for a Federal Pell Grant but you may be eligible for other aid. Your school will use your EFC to determine your financial aid eligibility for other federal grants, loans, and work-study, and possible funding from your state and school.

WHAT YOU MUST DO NOW (Use the checklist below to make sure that all of your issues are resolved.)

If you need to make corrections to your information, click 'Make FAFSA Corrections' on the 'My FAFSA' page using your FSA ID. If you need additional help with your SAR, contact your school's financial aid office or click the 'Help' icon on the FAFSA home page. If your mailing address or e-mail address changes, you can make the correction online.

#### ► FAFSA Data

Assumed fields, based on the data you entered, are marked with an "\*" (asterisk) sign.

1. Student's Last Name:	BROWN
2. Student's First Name:	DALLAS
3. Student's Middle Initial:	0
4. Student's Permanent Mailing Address:	324 HAMILTON ST
5. Student's Permanent City:	HARRISBURG
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17102
8. Student's Social Security Number:	XXX-XX-9649
9. Student's Date of Birth:	05/09/2002
10. Student's Telephone Number:	(717) 319-2282
11. Student's Driver's License Number:	
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	dallasobrown09@gmail.com
14. Student's Citizenship Status:	YES, I AM A U.S. CITIZEN (OR U.S. NATIONAL)



15. Student's Alien Registration Number:	
16. Student's Marital Status:	I AM SINGLE
17. Student's Marital Status Date:	
18. Student's State of Legal Residence:	PA
19. Was Student a Legal Resident Before January 1, 2015?	YES
20. Student's Legal Residence Date:	
21. Is the Student Male or Female?	FEMALE
22. Register Student With Selective Service System?	NO
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	HIGH SCHOOL
25. Parent 2 Educational Level:	COLLEGE OR BEYOND
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	DAUPHIN COUNTY TECHNICAL SCHOOL
27b. Student's High School City:	HARRISBURG
27c. Student's High School State:	PA
28. First Bachelor's Degree before 2020-2021 School Year?	NO
29. Student's Grade Level in College in 2020-2021:	NEVER ATTENDED COLLEGE/1ST YR.
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	DON'T KNOW
32. Student Filed 2018 Income Tax Return?	ALREADY COMPLETED
33. Student's Type of 2018 Tax Form Used:	FOREIGN TAX RETURN, IRS 1040NR, OR IRS 1040NR-EZ
34. Student's 2018 Tax Return Filing Status:	SINGLE
35. Student Filed Schedule 1?	
36. Student's 2018 Adjusted Gross Income:	\$2,006
37. Student's 2018 U.S. Income Tax Paid:	\$88
38. Student's 2018 Income Earned from Work:	\$1,568
39. Spouse's 2018 Income Earned from Work:	
40. Student's Total of Cash, Savings, and Checking Accounts:	\$15
41. Student's Net Worth of Current Investments:	\$0
42. Student's Net Worth of Businesses/Investment Farms:	\$0
43a. Student's Education Credits:	\$0

43b. Student's Child Support Paid:	\$0
43c. Student's Taxable Earnings from Need-Based Employment Programs:	\$0
43d. Student's College Grant and Scholarship Aid Reported to IRS as Income:	\$0
43e. Student's Taxable Combat Pay Reported in AGI:	\$0
43f. Student's Cooperative Education Earnings:	\$0
44a. Student's Payments to Tax-Deferred Pensions & Retirement Savings:	\$0
44b. Student's Deductible Payments to IRA/Keogh/Other:	\$0
44c. Student's Child Support Received:	\$0
44d. Student's Tax Exempt Interest Income:	\$0
44e. Student's Untaxed Portions of IRA Distributions and Pensions:	\$0
44f. Student's Housing, Food, & Living Allowances:	\$0
44g. Student's Veterans Noneducation Benefits:	\$0
44h. Student's Other Untaxed Income or Benefits:	\$0
44i. Money Received or Paid on Student's Behalf:	\$0
45. Student Born Before January 1, 1997?	NO
46. Is Student Married?	NO
47. Working on Master's or Doctorate in 2020-2021?	NO
48. Is Student on Active Duty in U.S. Armed Forces?	NO
49. Is Student a Veteran?	NO
50. Does Student Have Children He/She Supports?	NO
51. Does Student Have Dependents Other than Children/Spouse?	NO
52. Parents Deceased?/Student Ward of Court?/In Foster Care?	NO
53. Is or Was Student an Emancipated Minor?	NO
54. Is or Was Student in Legal Guardianship?	NO
55. Is Student an Unaccompanied Homeless Youth as Determined by High School/Homeless Liaison?	NO
56. Is Student an Unaccompanied Homeless Youth as Determined by HUD?	NO
57. Is Student an Unaccompanied Homeless Youth as Determined by Director of Homeless Youth Center?	NO
58. Parents' Marital Status:	MARRIED OR REMARRIED
59. Parents' Marital Status Date:	07/2011
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-5535

61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	BROWN
62. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	A
63. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	11/25/1970
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-2351
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	BROWN
66. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	D
67. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	02/28/1972
68. Parents' E-mail Address:	antoinebrown88@yahoo.com
69. Parents' State of Legal Residence:	PA
70. Were Parents Legal Residents Before January 1, 2015?	YES
71. Parents' Legal Residence Date:	
72. Parents' Number of Family Members in 2020-2021:	5
73. Parents' Number in College in 2020-2021 (Parents Excluded):	1
74. Parents Received Medicaid or Supplemental Security Income?	NO
75. Parents Received SNAP?	NO
76. Parents Received Free/Reduced Price Lunch?	NO
77. Parents Received TANF?	NO
78. Parents Received WIC?	NO
79. Parents Filed 2018 Income Tax Return?	ALREADY COMPLETED
80. Parents' Type of 2018 Tax Form Used:	IRS 1040
81. Parents' 2018 Tax Return Filing Status:	MARRIED-FILED JOINT RETURN
82. Parents Filed Schedule 1?	
83. Is Parent a Dislocated Worker?	
84. Parents' 2018 Adjusted Gross Income:	\$137,902
85. Parents' 2018 U.S. Income Tax Paid:	\$12,669
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$34,880
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$100,601
88. Parents' Total of Cash, Savings, and Checking Accounts:	
89. Parents' Net Worth of Current Investments:	
90. Parents' Net Worth of Businesses/Investment Farms:	
91a. Parents' Education Credits:	\$0

91b. Parents' Child Support Paid:	\$0
91c. Parents' Taxable Earnings from Need-Based Employment Programs:	\$0
91d. Parents' College Grant and Scholarship Aid Reported to IRS as Income:	\$0
91e. Parents' Taxable Combat Pay Reported in AGI:	\$0
91f. Parents' Cooperative Education Earnings:	\$0
92a. Parents' Payments to Tax-Deferred Pensions & Retirement Savings:	\$6,000
92b. Parents' Deductible Payments to IRA/Keogh/Other:	\$0
92c. Parents' Child Support Received:	\$0
92d. Parents' Tax Exempt Interest Income:	\$0
92e. Parents' Untaxed Portions of IRA Distributions and Pensions:	\$0
92f. Parents' Housing, Food, & Living Allowances:	\$0
92g. Parents' Veterans Noneducation Benefits:	\$0
92h. Parents' Other Untaxed Income or Benefits:	\$0
93. Student's Number of Family Members in 2020-2021:	
94. Student's Number in College in 2020-2021:	
95. Student Received Medicaid or Supplemental Security Income?	NO
96. Student Received SNAP?	NO
97. Student Received Free/Reduced Price Lunch?	NO
98. Student Received TANF?	NO
99. Student Received WIC?	NO
100. Is Student or Spouse a Dislocated Worker?	
101a. First Federal School Code:	002083
101b. First Housing Plans:	ON CAMPUS
101c. Second Federal School Code:	
101d. Second Housing Plans:	
101e. Third Federal School Code:	
101f. Third Housing Plans:	
101g. Fourth Federal School Code:	
101h. Fourth Housing Plans:	
101i. Fifth Federal School Code:	
101j. Fifth Housing Plans:	

101k. Sixth Federal School Code:	
101l. Sixth Housing Plans:	
101m. Seventh Federal School Code:	
101n. Seventh Housing Plans:	
101o. Eighth Federal School Code:	
101p. Eighth Housing Plans:	
101q. Ninth Federal School Code:	
101r. Ninth Housing Plans:	
101s. Tenth Federal School Code:	
101t. Tenth Housing Plans:	
102. Date Completed:	11/05/2019
103. Signed By:	BOTH STUDENT AND PARENT
104. Preparer's Social Security Number:	
105. Preparer's Employer Identification Number (EIN):	
106. Preparer's Signature:	

> **Graduation/Retention/Transfer Rates**

The table shows the graduation, retention, and transfer rates for the schools you selected. Go to the College Scorecard Web site for complete information.

School Name	Graduation Rate	Retention Rate	Transfer Rate	Additional Information from <i>College Scorecard</i>
MORGAN STATE UNIVERSITY	35%	73%	25%	N/A

> **Your Financial Aid History Information**

The information below is the total amount of student loans that you owe. These loans are administered by the U.S. Department of Education (ED). You should confirm that these loan totals are correct. You can view details on the individual loans that make up these totals at the National Student Loan Data System (NSLDS) Web site. If you feel that the amounts listed on this page are incorrect, or you have other questions related to a loan, you should contact the loan servicer indicated on the NSLDS Web site. You can obtain general information about each of the types of loans that are listed below by visiting our StudentAid.gov Web site.

Note that the "Subsidized" and "Unsubsidized" amounts include the appropriate portions of any Consolidation Loans you may have. If there is an amount listed for "Unallocated Consolidation Loans" it is because we could not determine whether those balances were subsidized or unsubsidized.

Remember you are responsible for repaying all of the amounts that you borrow, plus interest. As a general rule, with an assumed interest rate of 5%, the monthly payment amount over a ten-year repayment period would be approximately \$10.61 for every \$1,000 that you borrowed. Of course your actual repayment amount will depend upon how much you borrow, the interest rate when you enter repayment, and how long your repayment term is.

Total Amount of Loans Outstanding -			
FFEL (Bank Loans) and/or Direct Loans:	Total Principal Balance	Remaining Amount to be Disbursed	Total
Subsidized Loans:			
Unsubsidized Loans:			
Combined Loans:			
Unallocated Consolidation Loans:			

FFEL (Bank Loans) and/or Direct Loans:	Total Principal Balance	Remaining Amount to be Disbursed	Total
Federal Perkins Loan Amounts:			
Total Outstanding Principal Balance:			
2020-2021 Loan Amount			
TEACH Grants Converted to Direct Loans:			
Unsubsidized Loans:			

At this point, the school(s) listed on your application have access to your information. The school(s) may put together or change an aid package based on your Expected Family Contribution and notify you.

The amount of aid you receive from a school will depend on the cost of attendance at that school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional appropriations, and other factors. Review your financial aid notification from the school(s) or contact the Financial Aid Administrator at the school(s).

Note: Your school has the authority to request copies of certain financial documents to verify information you reported on your application.

**To protect the confidentiality of your application data, you should never give, share, or disclose your FSA ID to anyone, including commercial service providers that provide assistance with the financial aid process. You should keep your FSA ID in a safe location**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0001. Public reporting burden for this collection of information is estimated to average 5 to 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. If you have comments or concerns regarding the status of your individual submission of this form, please contact the Federal Student Aid Information Center, P.O. Box 84, Washington, D.C. 20044 directly.

We may request additional information from you to process your application more efficiently. We will collect this additional information only as needed and on a voluntary basis.

By answering questions 101a through 101t, and signing the Free Application for Federal Student Aid, you give permission to the U.S. Department of Education to provide information from your application to the college(s) you entered. You also agree that such information is deemed to incorporate by reference the certification statement on the sign and submit page of the financial aid application. The certification statement can be viewed at [StudentAid.gov/2021/help/certification-statement](https://StudentAid.gov/2021/help/certification-statement).

**WARNING:** If you are convicted of drug distribution or possession for an offense that occurred while you were receiving Title IV aid, your eligibility for Title IV student financial aid is subject to suspension or termination. If your drug conviction status changes at any time during the 2020-2021 award year, you must update your answer to the drug conviction affecting eligibility question.

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Dallas O Brown

Scholarship Essay

15 May 2020

Graduating highschool, I will be attending Morgan State University to major in the Business Administration program. I intend to use my business degree to be a future multi business owner and an accountant. I will undertake any challenge that comes with making my desired future possible. Gaining knowledge in the Business Administration Program will be the largest factor of becoming dominant in the business industry. This has been a goal of mine that I push closer towards everyday. Today, I continue to challenge myself ,to strengthen my skills in time management, leadership, and multitasking . Developing my mind in the critical process of analyzing and planning various business operations will further help me comprehend every aspect in my business plans. Accounting is also one of the most important factors of being in the business industry and owning my own business. I would like to become an accountant as well, considering that I would be able to inspect my own functions and financial statement analysis.

I am fully aware that it will take hard work and dedication to fully interpret many of the functions that the business field includes. Overall , I plan to continue to work my hardest to reach my goal of being a multi business owner and accountant. I am overseeing the obstacles that require developing myself and my mind towards the business world. Attending Morgan State University will make my dreams become a reality. Entering into this Morgan State made me feel like I belonged and the opportunities were endless. Staring in the Fall I will be onto a new beginning and opening a variety of doors to success.