

NAME DEA, ASHLEY

- 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 checked="" type="checkbox"/> Trinity |

Completed Application

- Other Scholarship Information
- Student Resume
- FAFSA SAR EFC: 41499
- Letter of Extenuating Circumstances
- Essay

Tuition Bill

Financial Aid Information

Transcript GPA: 2.89

School Counselor Form (only if HS applicant)

NOTES:

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 Ashley	Middle Initial A	Last Name Dean	Suffix e.g., Jr.
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Pronoun
e.g., he, she, they

She

Nickname or Preferred Name

Address 1 Street Address 2125 NORTHVIEW LN	Address 2 Apt./Unit #
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City HARRISBURG	County Dauphin County	State Pennsylvania	Zip Code 17110
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Phone
XXX-XXX-XXXX
7175716497

E-mail Address
Please provide an e-mail address you will continue to check throughout the year
aad93@pitt.edu

Date of Birth April 17, 1999	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
N/A

Family Information

Parent 1 / Caregiver 1

Relationship to Applicant

Mother

Prefix e.g., Mr., Miss, Ms., Mrs. Mrs.	First Name Tawana	Middle Initial L	Last Name Dean
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Pronoun

e.g., he, she, they
she

Employer PA American Water	Occupation Customer service manager
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Address 1 Home Address 2125 Northview Lane	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	State PA	Zip 17110
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Home Phone xxx-xxx-xxxx 7176491042	Work Phone xxx-xxx-xxxx	Cell Phone xxx-xxx-xxxx
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E-mail Address

Please provide an e-mail address that is checked regularly
teamdean5@comcast.net

Parent 2 / Caregiver 2

Relationship to Applicant

Father

Prefix e.g., Mr., Miss, Ms., Mrs. Mr.	First Name Adrian	Middle Initial M	Last Name Dean
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Pronoun

e.g., he, she, they
he

Employer Dauphin County	Occupation Probation Officer
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Address 1 Home Address 2125 Northview Lane	Address 2 Apt./Unit #
--	--------------------------

City Harrisburg	State PA	Zip 17110
--------------------	-------------	--------------

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

XXX-XXX-XXXX
7175796755

XXX-XXX-XXXX

XXX-XXX-XXXX

E-mail Address

Please provide an e-mail address that is checked regularly

teamdean5@comcast.net

Father Deceased?

No

Mother Deceased?

No

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

Trinity High School

High School Address 1

3601 Simpson Ferry Road

High School Address 2

City

Camp Hill

State

Pennsylvania

Zip Code

17011

High School Graduation Date

May 26, 2017

Cumulative GPA

3.7

Cumulative Class Rank

0

Total H.S. Class Size

120

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

Prefix

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

First Name

Last Name

Walsh

Phone

XXX-XXX-XXXX

E-mail Address

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

<None>

College/University 2

Acceptance Status

<None>

College/University 3

Acceptance Status

<None>

Year in college for upcoming school year

Senior

Major and minor field of study

Nursing

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, 2021

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

University of Pittsburgh at Johnstown

Expected Annual Tuition & Fees

Total dollar figure for both fall & spring semesters

18,000

Expected Annual Room & Board

Total dollar figure for both fall & spring semesters

7,000

Expected Annual Textbooks & Supplies

Total dollar figure for both fall & spring semesters

1,000

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?

Yes

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

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.

Through working and loans is how I will be financing my education.



OTHER SCHOLARSHIP INFORMATION

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

Scholarship Name	Received	Amount: \$
Basketball scholarship	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$2500
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
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_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
_____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____

Student Resume

List any school, community and church 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	HS C		Timeframe	FR	SO	JR	SR	Total # Hours
	Month(s) & Year(s)	FR	SO	JR	SR			
Womens Basketball member	<input type="checkbox"/>	<input checked="" type="checkbox"/>	All year	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14hrs/wk
Black Action Society	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8/17-5/20	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3hrs/ mo
Student nursing assoc. of PA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8/17-5/20	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	3hr/mo
Key club	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/13-6/16	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4hr/mo
Activity rep	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/16-5/17	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3hr/wk
Pep club	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/14-6/17	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1hr/wk
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Community & Church Activities	HS C		Timeframe	FR	SO	JR	SR	Total # Hours
	Month(s) & Year(s)	FR	SO	JR	SR			
Student athlete committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8/17-5/18	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24 hours
Project ABEL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	10/17-3/20	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20 hours
Caitlin Smiles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All year	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	24 hours
Jamaica service trip	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6/17-7/18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	200 hours
Advanced hoops counselor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All year	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	35 hours
	<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
Bishop Lawrence National Honors Society	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2016-2017
Foreign Language Honors Society	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	2015-2017
	<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"/>	
	<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	Employer	Position	Dates of Employment	Average Hours Worked Per Week
	Commonwealth of PA	Clerk	5/17-8/17	37.5
	Commonwealth of PA	Clerk	5/19-8/19	37.5
	Penn State Hershey Med	Nurse Extern	5/20-8/20	40

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:	04/29/2020	XXX-XX-5982 DE 01
Processed Date:	04/30/2020	EFC: 41499
		DRN: 9387

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 41499. 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.

There is a limit to the total amount of subsidized Federal student loans that you may receive. Visit <https://StudentAid.gov> and select Types of Aid/Loans for more information.

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:	DEAN
2. Student's First Name:	ASHLEY
3. Student's Middle Initial:	
4. Student's Permanent Mailing Address:	2125 NORTHVIEW LANE
5. Student's Permanent City:	HARRISBURG
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17110
8. Student's Social Security Number:	XXX-XX-5982
9. Student's Date of Birth:	04/17/1999
10. Student's Telephone Number:	(717) 571-6497
11. Student's Driver's License Number:	
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	aad93@pitt.edu
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?	
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	COLLEGE OR BEYOND
25. Parent 2 Educational Level:	COLLEGE OR BEYOND
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	TRINITY HIGH SCHOOL
27b. Student's High School City:	CAMP HILL
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:	4TH YR./SENIOR
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	YES
32. Student Filed 2018 Income Tax Return?	ALREADY COMPLETED
33. Student's Type of 2018 Tax Form Used:	Transferred from the IRS
34. Student's 2018 Tax Return Filing Status:	SINGLE
35. Student Filed Schedule 1?	
36. Student's 2018 Adjusted Gross Income:	Transferred from the IRS
37. Student's 2018 U.S. Income Tax Paid:	Transferred from the IRS
38. Student's 2018 Income Earned from Work:	Transferred from the IRS
39. Spouse's 2018 Income Earned from Work:	
40. Student's Total of Cash, Savings, and Checking Accounts:	\$500
41. Student's Net Worth of Current Investments:	\$0
42. Student's Net Worth of Businesses/Investment Farms:	\$0
43a. Student's Education Credits:	Transferred from the IRS
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:	Transferred from the IRS
44c. Student's Child Support Received:	\$0
44d. Student's Tax Exempt Interest Income:	Transferred from the IRS
44e. Student's Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
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:	07/1991
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-2271

61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	DEAN
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:	06/13/1967
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-8990
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	DEAN
66. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	T
67. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	06/07/1968
68. Parents' E-mail Address:	teamdean5@comcast.net
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:	3
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:	Transferred from the IRS
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:	Transferred from the IRS
85. Parents' 2018 U.S. Income Tax Paid:	Transferred from the IRS
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$53,248
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$98,484
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:	Transferred from the IRS
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:	\$11,230
92b. Parents' Deductible Payments to IRA/Keogh/Other:	Transferred from the IRS
92c. Parents' Child Support Received:	\$0
92d. Parents' Tax Exempt Interest Income:	Transferred from the IRS
92e. Parents' Untaxed Portions of IRA Distributions and Pensions:	Transferred from the IRS
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:	008815
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:	04/29/2020
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

College 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>
UNIVERSITY OF PITTSBURGH	82%	92%	0%	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:	\$3,500	\$000	\$3,500
Unsubsidized Loans:	\$16,000	\$000	\$16,000
Combined Loans:	\$19,500	\$000	\$19,500
Unallocated Consolidation Loans:	N/A		N/A
Federal Perkins Loan Amounts:			
Total Outstanding Principal Balance:	N/A		
2020-2021 Loan Amount:	N/A		
TEACH Grants Converted to Direct Loans:			
Unsubsidized Loans:	N/A		N/A

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](#).

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.

Ashley Dean
Samuel L. Abrams Foundation

I believe a post-secondary education is for me because of my love for learning. I also enjoy helping others. As a result, I have decided to major in nursing. I admit that I have wanted to be a nurse my entire life. I would like my nursing emphasis to focus on one of the two most vulnerable sectors of our population-children or the aging. I would like to work in a community centered health facility. After gaining practical experience in the nursing field, my hope would be to return to school to become a nurse practitioner.

I plan to attend the University of Pittsburgh, Johnstown (UPJ) Campus. I chose UPJ for a few reasons. I like the small campus and a small town. The people are friendly. Secondly, the nursing facilities are state of the art. In addition, the nursing faculty was experienced, knowledgeable and listened to my goals.

05/30/2020

To the Samuel Abrams scholarship committee,

I have been a student-athlete at the University of Pittsburgh at Johnstown for the past 3 years. Due to COVID-19, I lost my partial scholarship. The scholarship covered housing. I am unsure of the future of athletics and having any assistance meeting my educational costs. I will be financing my education through loans. Any assistance you could provide will be greatly appreciated.

Thank you for your consideration,

Ashley Dean



Term Statement: Fall Term 2020-2021
Term Balance: \$6,234.00
***Net of Anticipated Aid**
Report Date: As of 07/29/2020

Student ID: 4184242
Ashley Dean
Due Upon Receipt

Fall Term 2020-2021

Date	Description	Amount
07/21/2020	UPJ Housing Charges	\$3,305.00
07/21/2020	UPJ Meal Plan Charges	\$925.00
07/26/2020	Student Activity Fee	\$72.00
07/26/2020	Facility Fee	\$98.00
07/26/2020	Computer/Network Service Fee	\$175.00
07/26/2020	UG Tuition UPJ-NURS PA	\$8,454.00
07/26/2020	Recreation Fee	\$61.00
07/26/2020	Student Health Service Fee	\$40.00
07/26/2020	Assessment and Progression Fee (ADVNC D CLIN PROB SOLVING CLIN)	\$120.00
	Federal UnSubsidized Loan 01	-\$3,711.00
	Athletic Housing scholarship	-\$3,305.00
	Term Balance, Net of Anticipated Aid*	\$6,234.00

The Term Balance is for a single term. To see the total due for all terms, visit Account Summary or Account Activity in PittPAY.

***Anticipated Aid:** students are given credit for most types of financial aid that are expected to apply to the student account once federal regulations permit the disbursement of the aid, AND after the student has completed all aid requirements (<http://payments.pitt.edu/mpn-and-entrance-counseling/>).

Tuition and Mandatory Fees are available at <http://payments.pitt.edu/tuition-rates-fees/>

For Online Payments, Students and Authorized Users login to PittPAY at <http://payments.pitt.edu>.

- ✓ Pay by eCheck (electronic deduction from a personal U.S. checking account), for no additional fee.
- ✓ If you elect to pay by debit or credit, a 2.75% non-refundable service fee will be added to each payment. Discover, MasterCard, and Visa are accepted.

For payments by mail, detach and include this remittance form.



To avoid late fees, please pay upon receipt.

For the total due for all terms, view Account Activity in PittPAY.

Student ID: 4184242
Ashley Dean
2125 Northview Lane
Harrisburg, PA 17110

Make checks payable to:
University of Pittsburgh
-Include Student's Name
and seven-digit student
ID number on check.

Remittance Form

Payment
Amount

PAYMENT ADDRESS:
UNIVERSITY OF PITTSBURGH
PO BOX 643092
PITTSBURGH, PA 15264-3092

