

NAME ISKRIC, SYLER

- Application Complete
- FIMS
- Spreadsheet

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

New Applicant Re-applicant

CHECKLIST:

Graduated from one of the following schools:

- | | |
|---|--|
| <input checked="" 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: 864
- Letter of Extenuating Circumstances
- Essay

Tuition Bill

Financial Aid Information

Transcript GPA: 3.18

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	First Name	Middle Initial	Last Name	Suffix
e.g., Mr., Miss, Ms., Mrs. Ms	Skyler	M	Iskric	e.g., Jr.

Pronoun
e.g., he, she, they
she

Nickname or Preferred Name

Address 1	Address 2
Street Address 601 Mountain Road	Apt./Unit #

City	County	State	Zip Code
Marysville	Perry County	Pennsylvania	17053

Phone
xxx-xxx-xxxx
7179916710

E-mail Address
Please provide an e-mail address you will continue to check throughout the year
skyiskric02@gmail.com

Date of Birth	Gender	U.S. Citizen
May 31, 2002	Female	Yes

Are you Married?	Name of Spouse if applicable
No	

Number of Dependents and Age(s)
if applicable
0

Family Information

Parent 1 / Caregiver 1

Relationship to Applicant
Mother

Prefix	First Name	Middle Initial	Last Name
e.g., Mr., Miss, Ms., Mrs. Mrs	Monica	S	Iskric

Pronoun
e.g., he, she, they
she

Employer	Occupation
Shippensburg University Foundation	Project Assistant

Address 1	Address 2
Home Address 601 Mountain Road	Apt./Unit #

City	State	Zip
Marysville	PA	17053

Home Phone	Work Phone	Cell Phone
XXX-XXX-XXXX	XXX-XXX-XXXX	XXX-XXX-XXXX 7179912156

E-mail Address
Please provide an e-mail address that is checked regularly
msiskr@ship.edu

Parent 2 / Caregiver 2

Relationship to Applicant
Father

Prefix	First Name	Middle Initial	Last Name
e.g., Mr., Miss, Ms., Mrs. Mr	Ryan	E	Iskric

Pronoun
e.g., he, she, they
he

Employer	Occupation
----------	------------

Reliable Maintenance Services Labor

Address 1 Address 2
Home Address Apt./Unit #
601 Mountain Road

City State Zip
Marysville PA 17053

Home Phone Work Phone Cell Phone
XXX-XXX-XXXX XXX-XXX-XXXX XXX-XXX-XXXX
7174438818

E-mail Address
Please provide an e-mail address that is checked regularly

Father Deceased? Mother Deceased? Parents Divorced? Are you the first in your family to attend college?
No No No No

List names, ages, and educational levels of siblings living in your household:
Name, Age, Grade, or Year in College & Name of College
Cayetano Reyes- 20years old, Freshman at Edinboro University Mason Iskric - 13 years old 7th grade at St Catherine Laboure School
Please provide any additional information regarding your family, if necessary:
Cayetano Reyes is my uncle, my grandma passed away in 2014 and my parents received guardianship of him

High School Information

High School Attending
Bishop McDevitt High School

High School Address 1 High School Address 2
1 Crusader Way

City State Zip Code
Harrisburg Pennsylvania 17111

High School Graduation Date Cumulative GPA Cumulative Class Rank Total H.S. Class Size
May 21, 2020 3.4 110 178

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

Prefix First Name Last Name

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

Phone E-mail Address
xxx-xxx-xxxx bstovall@bishopmcdevitt.org
7172367973

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
Shippensburg University	Yes

College/University 2	Acceptance Status
Robert Morris University	Yes

College/University 3	Acceptance Status
LaSalle University	Pending

Year in college for upcoming school year	Major and minor field of study
Freshman	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 10, 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
LaSalle University

Expected Annual Tuition & Fees
Total dollar figure for both fall & spring semesters
30,700

Expected Annual Room & Board
Total dollar figure for both fall & spring semesters
15,474

Expected Annual
Textbooks &
Supplies

Total dollar figure for
both fall & spring
semesters
1,500.00

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?

Partial

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?

Will not know until scholarships are processed

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

8

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.

Where I attend will be based off financial aid I receive. I will have to take loans out for the balance after financial aid decisions have been made. I want to try and work during school but I also want to focus on my academics.

Attachments

Title	File Name
FAFSA Student Aid Report	FAFSA SAR Report 2020.pdf
Other Scholarship Information	OtherScholarshipInformation.pdf
Student Resume	StudentResume 2020.pdf
Letter of Extenuating Circumstances	Letter of Extenuating Circumstances.pdf
Personal Essay	Personal Essay.pdf



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	
<u>FAFSA</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Pell Grant</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Harry N and Melva A Derickson Scholarship</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Ollie Rosenberg Fund Scholarship</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Roberta L Houpt Fund Scholarship</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Samuel L Abrams Foundation Scholarship</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>William S and Arthur R Stambaugh Scholarsh</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	Amount: \$ _____
<u>Elks National Foundation Most Valuable</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>Prudential Spirit of Community Awards</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>Denny's Hungry for Education</u>	<input type="checkbox"/> Yes <input checked="" 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: \$ _____
_____	<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 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	HS C		Timeframe	FR SO JR SR				Total # Hours
	Month(s) & Year(s)	FR	SO	JR	SR			
Track & Field	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2/18-5/20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	300
Pro Life Club	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/16-6/18	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25
Student Ambassador	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/17-5/20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	35
Spanish Club	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8/17-5/20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	50
	<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"/>	

Community & Faith-based Activities	HS C		Timeframe	FR SO JR SR				Total # Hours
	Month(s) & Year(s)	FR	SO	JR	SR			
Shermansdale Youth Baseball	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2/17-present	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	100
Babysitting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2016-present	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	150
Taking care of great-great gma	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2016-2017	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	300
Church bingo	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2016-2017	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30
	<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
	Month(s) & Year(s)	FR	SO	JR	SR		
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
National Society for High School Scholars	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2019
	<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
	Hersheypark	Food	1/17-12/17	25
	Twin Kiss Ice Cream	Food/cashier	3/18-6/18	10
	Giant Food Store	Cashier	6/18-presnet	15

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:	10/07/2019	XXX-XX-7707 IS 06
Processed Date:	02/10/2020	EFC: 864 *
		DRN: 4360

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 864. You may be eligible to receive a Federal Pell Grant and other federal student aid. Your school will use your EFC to determine your financial aid eligibility for federal grants, loans, and work-study, and possible funding from your state and school.

Your FAFSA has been selected for a review process called verification. Your school has the authority to request copies of certain financial documents from you and your parent(s).

There is a limit to the total amount of Federal Pell Grants that a student may receive, which is the equivalent of 6 school years. Once a total amount of Pell Grant eligibility has been received, a student can no longer receive Pell Grant aid.

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.

Based on your EFC of 864, you may be eligible to receive a Federal Pell Grant of up to \$5,345 for the 2020-2021 school year provided you have not met or exceeded the lifetime limit established for the Federal Pell Grant program.

FAFSA Data

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

1. Student's Last Name:	ISKRIC
2. Student's First Name:	SKYLER
3. Student's Middle Initial:	
4. Student's Permanent Mailing Address:	601 MOUNTAIN RD
5. Student's Permanent City:	MARYSVILLE
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17053
8. Student's Social Security Number:	XXX-XX-7707
9. Student's Date of Birth:	05/31/2002
10. Student's Telephone Number:	(717) 991-6710
11. Student's Driver's License Number:	33072494
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	skyiskric02@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?	
23. Drug Conviction Affecting Eligibility?	ELIGIBLE FOR AID
24. Parent 1 Educational Level:	HIGH SCHOOL
25. Parent 2 Educational Level:	HIGH SCHOOL
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	BISHOP MCDEVITT HIGH 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:	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:	\$28
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:	06/2005
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-0676

61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	ISKRIC
62. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	R
63. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	01/10/1978
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-0416
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	ISKRIC
66. Parent 2 (Father's/Mother's/Stepparent's) First Name Initial:	M
67. Parent 2 (Father's/Mother's/Stepparent's) Date of Birth:	10/19/1979
68. Parents' E-mail Address:	msiskr@shp.edu
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):	2
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?	NO
83. Is Parent a Dislocated Worker?	
84. Parents' 2018 Adjusted Gross Income:	\$44,370
85. Parents' 2018 U.S. Income Tax Paid:	\$0
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$0
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$44,370
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:	\$0
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:	003326
101b. First Housing Plans:	ON CAMPUS
101c. Second Federal School Code:	003298
101d. Second Housing Plans:	ON CAMPUS
101e. Third Federal School Code:	003399
101f. Third Housing Plans:	ON CAMPUS
101g. Fourth Federal School Code:	003359
101h. Fourth Housing Plans:	ON CAMPUS
101i. Fifth Federal School Code:	003297
101j. Fifth Housing Plans:	ON CAMPUS
101k. Sixth Federal School Code:	003325
101l. Sixth Housing Plans:	ON CAMPUS
101m. Seventh Federal School Code:	003329
101n. Seventh Housing Plans:	ON CAMPUS
101o. Eighth Federal School Code:	003388
101p. Eighth Housing Plans:	ON CAMPUS
101q. Ninth Federal School Code:	003986
101r. Ninth Housing Plans:	ON CAMPUS
101s. Tenth Federal School Code:	003287
101t. Tenth Housing Plans:	ON CAMPUS
102. Date Completed:	10/07/2019
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

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>
SHIPPENSBURG UNIVERSITY	54%	73%	33%	N/A
MESSIAH COLLEGE	78%	87%	18%	N/A
YORK COLLEGE OF PENNSYLVANIA	59%	79%	31%	N/A
ROBERT MORRIS UNIVERSITY	61%	80%	21%	N/A
MERCYHURST UNIVERSITY	68%	80%	6%	N/A
MILLERSVILLE UNIVERSITY OF PA	61%	77%	25%	N/A
PENNSYLVANIA STATE UNIVERSITY (THE)	85%	93%	0%	N/A
VILLANOVA UNIVERSITY	90%	95%	0%	N/A
DESALES UNIVERSITY	69%	81%	0%	N/A
LASALLE UNIVERSITY	66%	76%	24%	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:			
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](#).

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.

Letter of Extenuating Circumstances: Skyler Iskric

Financial aid to attend college is very important to me and may be the deciding factor on where I attend. My parents are not financially stable and are not able to contribute towards college. My uncle started college in the fall of 2019.

My mother's mom passed away in 2014 unexpectedly, she was 52. She had a son, who was 14 years old at the time. Once she passed, my parents received guardianship over him. They did not receive financial assistance. My grandmother did not work, she was on disability and his father was not involved. He made my parents sign documentation stating they would not come after him financially, this was the only way he would sign over guardianship.

My father's business has not done well the last few years. This has put a financial burden on our family. I try to work as much as possible, this way I am able to pay for things as well.

Personal Essay: Skyler Iskric

In today's society, education and attending college is stressed to kids today like never before. I believe it is now a common belief if you want to live the American dream you must attend college. For my career path, I have to attend college if I want to follow my dreams of becoming a nurse. I want to learn new knowledge and experience what college has to offer me. These experiences will help me grown as a person and will be helpful for my future.

There are many reasons why I chose La Salle University. The first reason would have to be that I made a goal when I was younger that I would attend college and become a nurse one day. I am very dedicated to pursuing my goal and in order to do so it is required a higher education. In searching for a college, that best fits my career path and me I looked at the area, cost and opportunities the campus has to offer. LaSalle is ranked as one of the top schools for nursing; they have many partnerships that will benefit me once I graduate.

Financial Summary

Student: Iskric, Skyler M (327943) (smist245@mail.rmu.edu)

Fall 2020

Due Date: 08/14/2020

Amount Due: \$1,414.00



Monthly Payment Plan Activation

Amount due today: \$50.00

Number of Payments: 9

Monthly Payment: \$325.33

Sign Up

[Monthly Payment Plan](#)

Pending Transactions

Date	Description	Amount
04/30/2020	Resident Life Deposit	\$100.00 CR
07/08/2020	University Services Fee	\$500.00
07/08/2020	Student Government Assn Fee	\$20.00
07/08/2020	Student Recreation Fee	\$125.00
07/08/2020	Standard Room - Yorktown	\$4,200.00
07/08/2020	Board	\$2,655.00
07/08/2020	Dorm Damage Deposit	\$100.00
07/08/2020	Residence Hall Assn Fee	\$5.00
07/08/2020	PA State Grant	\$2,262.00 CR
07/08/2020	Federal PELL Grant	\$2,748.00 CR
07/08/2020	Miscellaneous Scholarship	\$308.00 CR
07/08/2020	RMU GRANT	\$4,200.00 CR
07/08/2020	Public Price Match Plus Award	\$6,487.00 CR
07/08/2020	Colonial Award	\$1,000.00 CR
07/08/2020	Unsub Fed Direct Loan	\$990.00 CR
07/08/2020	Sub Fed Direct Loan	\$1,732.00 CR
07/08/2020	Unsub Additional Direct Loan	\$1,979.00 CR
07/08/2020	Undergrad Flat-Rate	\$15,415.00
07/08/2020	Orientation Fee	\$200.00
	Pending Total	\$1,414.00


Posted to Account

Date	Description	Amount
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No Transactions Posted to Account for Fall 2020

PERMANENT TRANSCRIPT

Student Information	
Skyler Iskric	
601 Mountain Rd	
Marysville, PA 17053	
ID: 24100951	
Birthdate: 05-31-2002	

School Information	
	BISHOP MCDEVITT HIGH SCHOOL 1 Crusader Way Harrisburg, PA 17111 7172367973 www.bishopmcdevitt.org CEEB Code: 391640

Class Record			
GR	SUBJECT	Final	CRDT
--- 2016-17 ---			
09	(CP) RELIGION I	86	1.00
09	ENGLISH I	91	1.00
09	WORLD CULTURES	90	1.00
09	(CP) WINDOWS	91	0.50
09	(CP) ALGEBRA I	84	1.00
09	(CP) BIOLOGY I	92	1.00
09	SPANISH I	98	1.00
09	PHYS ED/HEALTH	A	0.50
--- 2017-18 ---			
10	SERVICE	P	0.00
10	(CP) RELIGION II	85	1.00
10	(CP) ENGLISH LIT	90	1.00
10	(CP) MOD WORLD STD	85	1.00
10	GEOMETRY	97	1.00
10	(CP) CHEMISTRY I	90	1.00
10	SPANISH II	97	1.00
10	(CP) ART I	B	1.00
10	PHYS ED/HEALTH	A	0.50
--- 2018-19 ---			
11	SERVICE	P	0.00
11	(CP) RELIGION III	85	1.00
11	(ACP) AMERICAN LIT	78	1.00
11	(CP) AM HIST I/GOV	89	1.00
11	(CP) ALGEBRA II	91	1.00
11	(CP) BIOLOGY II	91	1.00
11	(H) SPANISH III	91	1.00
11	PHYS ED/HEALTH	B-	0.50
--- 2019-20 ---			
12	CONDUCT		0.00
12	SERVICE		0.00
12	(CP) RELIGION IV	89	1.00
12	(ACP) SHAKESPEARE	81	1.00
12	(CP) AM HIST II/EC	90	1.00
12	(H) PSYCHOLOGY	91	1.00
12	(CP) TRIGONOMETRY	84	1.00
12	(CP) ADVANCED ART 2-D	A	0.50
12	(CP) ADVANCED ART 3-D	A	0.50
12	PHYSICAL EDUCATION	A	0.25
12	(CP) WELLNESS & LIFE	97	0.25

Academic Standing	
Weighted GPA:	3.187
Career Credits:	27.50
Graduation Date: 5-28-2020	

Miscellaneous	
Conversion Table	
Numerical Grades = Letter Grades	
93 - 100 =	A
85 - 92 =	B
77 - 84 =	C
70 - 76 =	D
Below 70 =	F

Date: 7-7-20	Signature: Rachel Arnold	Title: Director of Counseling
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**THE FOUNDATION
FOR ENHANCING
COMMUNITIES**

Applicant's Name: Skyler Iskric

HIGH SCHOOL STUDENT INFORMATION SHEET

This page should be completed by your School Counselor.

General Student Information

High School Attended/Attending: Bishop McDevitt H.S.

High School Address: 1 Crusader Way
Street Address

Harrisburg City PA State 17111 Zip

H.S. Graduation Date: 05-28-2020 Cumulative Class Rank: 110

Cumulative GPA: 3.146 Total H.S. Class Size: 172

Attendance Information

Current School Year: # of Days Absent: 6.50 # of Days Tardy: 6.00

Previous School Year: # of Days Absent: 3.00 # of Days Tardy: 12

Test Scores Information

SAT Reading: 450 Math: 440 Date: 8/19
Reading: 490 Math: 420 Date: 12/19
Reading: _____ Math: _____ Date: _____

ACT Composite: N/A Date: _____

Signature Information

The school related information provided above is accurate and true to the best of my knowledge.

High School Counselor Signature: Rachel Arnold Date: 2/12/20

High School Counselor Printed Name: Rachel Arnold

High School Counselor Email Address: rarnold@bishopmcdevitt.org