

NAME LACKNER, DELANEY

- 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 checked="" 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: 0
- Letter of Extenuating Circumstances
- Essay

Tuition Bill

Financial Aid Information

Transcript GPA: 3.74

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 Delaney	Middle Initial	Last Name Lackner	Suffix e.g., Jr.
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Pronoun
e.g., he, she, they
She

Nickname or Preferred Name

Address 1 Street Address 6406 Chelton Avenue	Address 2 Apt./Unit #
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City Harrisburg	County Dauphin County	State Pennsylvania	Zip Code 17112
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Phone
XXX-XXX-XXXX
717-376-7685

E-mail Address
Please provide an e-mail address you will continue to check throughout the year
delaneymarie1234@gmail.com

Date of Birth December 03, 2000	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

Mother

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

First Name
Dawn

Middle Initial

Last Name
Shearer

Pronoun

e.g., he, she, they

Employer

Occupation

Address 1
Home Address

Address 2
Apt./Unit #

City

State
PA

Zip

Home Phone
XXX-XXX-XXXX

Work Phone
XXX-XXX-XXXX

Cell Phone
XXX-XXX-XXXX

E-mail Address

Please provide an e-mail address that is checked regularly

Parent 2 / Caregiver 2

Relationship to Applicant

<None>

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

First Name

Middle Initial

Last Name

Pronoun

e.g., he, she, they

Employer

Occupation

Address 1
Home Address

Address 2
Apt./Unit #

City

State
PA

Zip

Home Phone

Work Phone

Cell Phone

XXX-XXX-XXXX

XXX-XXX-XXXX

XXX-XXX-XXXX

E-mail Address

Please provide an e-mail address that is checked regularly

Father Deceased?

No

Mother Deceased?

No

Parents Divorced?

Yes

Are you the first in your family to attend college?

Yes

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

Central Dauphin High School

High School Address 1

High School Address 2

City

State

Pennsylvania

Zip Code

High School Graduation Date

June 04, 2019

Cumulative GPA

4.0

Cumulative Class Rank

97

Total H.S. Class Size

415

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

Prefix

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

First Name

Last Name

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

Sophomore

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 19, 2023

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

Towson University

Expected Annual Tuition & Fees

Total dollar figure for both fall & spring semesters

24,328

Expected Annual Room & Board

Total dollar figure for both fall & spring semesters

12,464

Expected Annual Textbooks & Supplies

Total dollar figure for both fall & spring semesters

1,080

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.

Off Campus

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.

I am financing my own education, taking out loans for the upcoming school year. I plan to obtain an on campus job to help pay for my schooling.



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: \$
<u>Samuel L. Abrams Foundation Scholarship</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	<u>Varies</u>
<u>Harry N. and Melva A. Derickson Scholarshi</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	<u>Varies</u>
<u>Reading FOP #9</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Pending	<u>\$500</u>
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending	Amount: \$ _____
<u>_____</u>	<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	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
PanRam	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2016-2019	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20
MiniThon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2015-2019	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	50
Varisty Basketball Team	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2015-2019	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	200
	<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"/>	

Community & Faith-based Activities	Timeframe		Month(s) & Year(s)	FR	SO	JR	SR	Total # Hours
	HS	C						
Ronald McDonald House	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2015-2019	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	20
Children's Miracle Network	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2015-2016	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
	<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"/>	

Awards & Honors	HS	C	FR	SO	JR	SR	Year
Basketball Team Caption	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2018-2019
	<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		Dates of Employment	Average Hours Worked Per Week
Employer	Position		
Mystique Barbershop Salon	Barber	2017-present	24
Mystique Barbershop Salon	Receptionist	2015-present	24

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:	10/04/2019	XXX-XX-2709 LA 01
Processed Date:	10/07/2019	EFC: 0
		DRN: 7466

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 0. 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.

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. Based on information reported to the National Student Loan Data System (NSLDS) by the schools you have attended, you have received Pell Grants for the equivalent of between one-half and one school year.

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.)

Be sure to review the items marked with a 'h' and make any corrections if necessary by clicking 'Make FAFSA Corrections' on the 'My FAFSA' page.

We assumed certain information to calculate your eligibility for federal student aid. We printed the assumption we made and a 'h' for each of these items. If our assumptions are correct, do not change them. If they are incorrect, you need to make the necessary corrections by clicking 'Make FAFSA Corrections' on the 'My FAFSA' page.

We assumed you did not file and will not file a 2018 income tax return (Item 32). Review this item.

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 0, you may be eligible to receive a Federal Pell Grant of up to \$6,195 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:	LACKNER
2. Student's First Name:	DELANEY
3. Student's Middle Initial:	M
4. Student's Permanent Mailing Address:	6406 CHELTON AVENUE
5. Student's Permanent City:	HARRISBURG
6. Student's Permanent State:	PA
7. Student's Permanent ZIP Code:	17112
8. Student's Social Security Number:	XXX-XX-2709
9. Student's Date of Birth:	12/03/2000
10. Student's Telephone Number:	(717) 376-7685
11. Student's Driver's License Number:	32579135
12. Student's Driver's License State:	PA
13. Student's E-mail Address:	dlackn1@students.lawson.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:	HIGH SCHOOL
25. Parent 2 Educational Level:	HIGH SCHOOL
26. High School or Equivalent Completed?	HIGH SCHOOL DIPLOMA
27a. Student's High School Name:	CENTRAL DAUPHIN SHS
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:	2ND YR./SOPHOMORE
30. Type of Degree/Certificate:	1ST BACHELOR'S DEGREE
31. Interested in Work-study?	DON'T KNOW
32. Student Filed 2018 Income Tax Return?	h
33. Student's Type of 2018 Tax Form Used:	h
34. Student's 2018 Tax Return Filing Status:	
35. Student Filed Schedule 1?	
36. Student's 2018 Adjusted Gross Income:	h
37. Student's 2018 U.S. Income Tax Paid:	h
38. Student's 2018 Income Earned from Work:	
39. Spouse's 2018 Income Earned from Work:	
40. Student's Total of Cash, Savings, and Checking Accounts:	
41. Student's Net Worth of Current Investments:	
42. Student's Net Worth of Businesses/Investment Farms:	
43a. Student's Education Credits:	
43b. Student's Child Support Paid:	
43c. Student's Taxable Earnings from Need-Based Employment Programs:	
43d. Student's College Grant and Scholarship Aid Reported to IRS as Income:	
43e. Student's Taxable Combat Pay Reported in AGI:	
43f. Student's Cooperative Education Earnings:	
44a. Student's Payments to Tax-Deferred Pensions & Retirement Savings:	
44b. Student's Deductible Payments to IRA/Keogh/Other:	
44c. Student's Child Support Received:	
44d. Student's Tax Exempt Interest Income:	
44e. Student's Untaxed Portions of IRA Distributions and Pensions:	
44f. Student's Housing, Food, & Living Allowances:	
44g. Student's Veterans Noneducation Benefits:	
44h. Student's Other Untaxed Income or Benefits:	
44i. Money Received or Paid on Student's Behalf:	
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:	DIVORCED OR SEPARATED
59. Parents' Marital Status Date:	01/2005
60. Parent 1 (Father's/Mother's/Stepparent's) Social Security Number:	

61. Parent 1 (Father's/Mother's/Stepparent's) Last Name:	
62. Parent 1 (Father's/Mother's/Stepparent's) First Name Initial:	
63. Parent 1 (Father's/Mother's/Stepparent's) Date of Birth:	
64. Parent 2 (Father's/Mother's/Stepparent's) Social Security Number:	XXX-XX-5726
65. Parent 2 (Father's/Mother's/Stepparent's) Last Name:	SHEARER
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:	07/03/1968
68. Parents' E-mail Address:	fashionmystiquesalon@gmail.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:	3
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?	YES
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:	HEAD OF HOUSEHOLD
82. Parents Filed Schedule 1?	YES
83. Is Parent a Dislocated Worker?	NO
84. Parents' 2018 Adjusted Gross Income:	\$-90,072
85. Parents' 2018 U.S. Income Tax Paid:	(\$0 ASSUMED) h
86. Parent 1 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	
87. Parent 2 (Father's/Mother's/Stepparent's) 2018 Income Earned from Work:	\$10,250
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:	
91b. Parents' Child Support Paid:	
91c. Parents' Taxable Earnings from Need-Based Employment Programs:	
91d. Parents' College Grant and Scholarship Aid Reported to IRS as Income:	
91e. Parents' Taxable Combat Pay Reported in AGI:	
91f. Parents' Cooperative Education Earnings:	
92a. Parents' Payments to Tax-Deferred Pensions & Retirement Savings:	
92b. Parents' Deductible Payments to IRA/Keogh/Other:	
92c. Parents' Child Support Received:	
92d. Parents' Tax Exempt Interest Income:	
92e. Parents' Untaxed Portions of IRA Distributions and Pensions:	
92f. Parents' Housing, Food, & Living Allowances:	
92g. Parents' Veterans Noneducation Benefits:	
92h. Parents' Other Untaxed Income or Benefits:	
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:	002099
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:	10/04/2019
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>
TOWSON UNIVERSITY	71%	85%	21%	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:	\$1,750	\$1,750	\$3,500
Unsubsidized Loans:	N/A	N/A	N/A
Combined Loans:	\$1,750	\$1,750	\$3,500
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 101i, 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 of 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.

I am a first-generation college student. My mother started her own business at the age of eighteen and my father has been involved in law enforcement since his low twenties. I feel as though I must obtain a post-secondary education in order to earn a secure job in the future. It is my goal to be able to support myself and my family with a well-paying job that I enjoy going to everyday. Although both of my parents are successful, I believe that it is necessary to get a degree in order to have the highest chance of getting a job.

I chose to study nursing at Towson University. After hours of thought and consideration of my options, I chose this school because of the environment that surrounds it. Towson is very close to a highly populated city with plenty of hospitals. The nursing program at Towson is competitive and will push me to challenge myself. I am excited to see what the future has to hold for me.

TBP Student Account - Fall 2020 - Estimated Financial Aid

Description	Code	Amount (\$)
Federal Pell Grant	901050010010	\$3,173.00
Fed Direct Subsidized Loan	901060060010	\$1,732.00
Institutional Grant	903050020100	\$500.00
Tiger Scholarship	903050030085	\$3,500.00
Total Estimated Aid:		\$8,905.00

TBP Student Account - Fall 2020 - Account Activity

Description	Code	Date	Due Date	Amount
COV19 UG Addtl Ath Fee Adj	206801000051	7/5/20		-\$8.13
COV-19 UG Addtl AxSrvFees Adj	206801000021	7/4/20		-\$5.28
UG Student Gov't Assoc Fee	102400042000	7/2/20		\$49.00
UG Technology Fee	102400041000	7/2/20		\$106.00
UG Aux Services Fees	102400010010	7/2/20		\$964.00
UG Athletics Fee	102400010100	7/2/20		\$499.00
UG Tuition Out-of-State	101400010100	7/2/20		\$10,549.00
BIOL Lab/Class Fee	102400100035	7/2/20		\$25.00
Term Balance:				\$12,178.59
Term Balance Including Estimated Aid:				\$3,273.59

Name: Delaney M. Lackner
 Student ID: 0713295
 Birthdate: 12-03-####

Towson University

OFFICE OF THE REGISTRAR
 8000 YORK ROAD
 TOWSON, MARYLAND 21252-0001

Official Transcript

Send To: PID:29290215

Print Date: 07-07-2020

Course	Description	Attempted	Earned	Grade	Points
BIOL 221	HUMAN A&P I [LECTURE]	3.00	0.00		0.000
BIOL 221L	HUMAN A&P I [LAB]	1.00	0.00		0.000
DFST 104	AMERICAN SIGN LANGUAGE I	3.00	0.00		0.000
PHIL 103	INTRODUCTION TO ETHICS	3.00	0.00		0.000
PSYC 203	HUMAN DEVELOPMENT	3.00	0.00		0.000

Beginning of Undergraduate Record

Fall 2019

Program: Bachelor of Science
 Plan: Pre-Nursing Major

Course	Description	Attempted	Earned	Grade	Points
ART 107	CERAMICS FOR NON-ART MAJORS	3.00	3.00	A	12.000
BIOL 191	INTRO BIOL FOR HLTH PROF [LEC]	3.00	3.00	B	9.000
BIOL 191L	INTRO BIOL FOR HLTH PROF [LAB]	1.00	1.00	A-	3.670
ENGL 102	WRITING FOR LIBERAL EDUCAT	3.00	3.00	A-	11.010
MATH 115	COLLEGE ALGEBRA	3.00	3.00	A	12.000
SOCI 101	INTRODUCTION TO SOCIOLOGY	3.00	3.00	B+	9.990

Term GPA: 3.604 Term Totals: 16.00 16.00
 Cum GPA: 3.604 Cum Totals: 16.00 16.00

Dean's List

Term GPA: 0.000 Term Totals: 13.00 0.00
 Cum GPA: 3.740 Cum Totals: 45.00 32.00

Undergraduate Career Totals
 Cum GPA: 3.740

GPA Hrs
 Cum Totals: 45.00 32.00 32.00 119.690

Catalog Year 2019-2020

End of Undergraduate Record
 End of Transcript

Sprrg 2020

Program: Bachelor of Science
 Plan: Pre-Nursing Major

Course	Description	Attempted	Earned	Grade	Points
CHEM 121	ALLIED HEALTH CHEM I LECTURE	3.00	3.00	A-	11.010
CHEM 121L	ALLIED HEALTH CHEM LAB I	1.00	1.00	A	4.000
KNES 235	PHYSICAL WELLNESS AMERICA	3.00	3.00	A	12.000
MATH 231	BASIC STATISTICS	3.00	3.00	A-	11.010
PSYC 101	INTRODUCTION TO PSYCHOLOGY	3.00	3.00	A	12.000
TSEM 102	TOWSON SEMINAR	3.00	3.00	A	12.000
Topic:	EDUC:Learn in Digital Society				

Term GPA: 3.876 Term Totals: 16.00 16.00
 Cum GPA: 3.740 Cum Totals: 32.00 32.00

Spring 2020 courses were completed during a state and national emergency.

Dean's List

Fall 2020

Program: Bachelor of Science
 Plan: Pre-Nursing Major

Sara M. Sides

Director, Registrar's Office