



General Need Analysis Request Form

The University of Kansas Office of Student Financial Aid www.financialaid.ku.edu	Strong Hall 1450 Jayhawk Blvd., Room 50 Lawrence, KS 66045-7535	Phone: 785-864-4700 Fax: 785-864-5469 Email: financialaid@ku.edu
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Request must be submitted two weeks prior to the scholarship application deadline. Last minute requests may result in the form not arriving to the donor by the scholarship application deadline.

Please print or type

Student Information

Name	Last	First	Middle Initial	KUID
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Address

Phone Number	Email address
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Term Information (check one below)			
<input type="checkbox"/> Summer 20__	<input type="checkbox"/> Fall 20__ only	<input type="checkbox"/> Spring 20__ only	<input type="checkbox"/> Fall 20__ & Spring 20__

Application Information	
<input type="checkbox"/>	I have a complete FAFSA processed by KU and have accepted any offered financial aid for the term(s) indicated above.
<input type="checkbox"/>	I have not completed a FAFSA for the term(s) indicated above.
NOTE: Failure to have a complete financial aid file may delay the processing of your need analysis. If your financial aid file is not complete, the information provided will be estimated figures based on the current academic year.	

Donor Information (NOTE: The original copy of the need analysis will be sent to the donor and a copy will be maintained as a part of your permanent financial aid record).

Donor Name

Donor Address

Donor Fax Number

I authorize the Office of Student Financial Aid to release my financial need information, scholarship application and supporting documents to the donor at the address listed above. I verify that all the information on this form is true and complete.

Signature	Date
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