

**SUMMER INCENTIVE GRANT APPLICATION**  
**WITTENBERG UNIVERSITY**  
SUMMER SESSION 2009

*Please complete the top section of this application and return the entire form to the Financial Aid Office, Room 2 Recitation Hall.*

Name \_\_\_\_\_

Box # \_\_\_\_\_ E-mail \_\_\_\_\_ Social Security # \_\_\_\_\_

Country of citizenship \_\_\_\_\_ If not USA, what is your formal  
academic goal at Wittenberg? \_\_\_\_\_

Number of Summer 2009 credits you anticipate taking at Wittenberg \_\_\_\_\_

If off-campus field study, indicate which locale \_\_\_\_\_

**Student signature & date** \_\_\_\_\_

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***For Office Use Only***

EFC \_\_\_\_\_  
***Financial Aid Office signature and date*** \_\_\_\_\_

Credits completed through Fall '08 \_\_\_\_\_

Credits registered for Spring '09 \_\_\_\_\_

Additional information:

SIG level \_\_\_\_\_

Amount awarded (per registration) \_\_\_\_\_

***SCE authorization & date*** \_\_\_\_\_