



**GENERAL NEED ANALYSIS
REQUEST FORM**

KU Visitor Center, 1502 Iowa St
Lawrence, KS 66045
www.affordability.ku.edu

785-864-4700 (phone)
785-864-5469 (fax)
financialaid@ku.edu

Submit this request two weeks prior to the scholarship application deadline. Requests submitted at the last minute or with incomplete information may result in the form not arriving to the donor by the scholarship application deadline.

First Name

Last Name

Middle Initial

KU ID Number

Phone Number

Email Address

PICK UP INFORMATION:

I will pick up at the KU Visitor Center

Please mail to recipient (please included address below)

Please fax to recipient (please included number below)

TERM INFORMATION (CHECK ONE BELOW):

Summer 20____

Fall 20____ only

Spring 20____ only

Fall 20____ & Spring 20____

APPLICATION INFORMATION

I have a complete Free Application for Federal Financial Aid (FAFSA) processed by KU and have accepted or declined any offered financial aid for the term(s) indicated above.

I have attached a copy of the scholarship/grant application for which a need analysis is required.

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 request. If your financial aid file is not complete, the information provided will be estimated figures based on the current academic year.

ADDITIONAL INFORMATION (INCLUDING RECEIPTANT NAME, FAX NUMBER, OR ADDRESS IF NECESSARY)

(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).

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

STUDENT SIGNATURE

DATE