



2009-2010 Minnesota State Grant Questionnaire

Student Name: _____

Macalester ID Number _____ OR Social Security Number: _____

1) If you graduated from high school, please provide the following:

Name of High School: _____

City & State of High School: _____

Graduation Year: _____

Your address at the time of graduation: _____

2) If you did not graduate from high school, did you earn your G.E.D.?

- Yes
 No

If yes, in which state? _____

3) Please provide the address at which your parents resided when you completed your Free Application for Federal Student Aid (FAFSA):

Macalester will ask you to help contact legislators and perhaps even visit the Capitol to show support for the Grant Program. While your participation in these grassroots lobbying efforts is completely voluntary, any help will be appreciated by your fellow grant recipients and by the College.

4) Please list all the states (or countries) in which you have resided, your dates of residence and your reason for residing (e.g., college, employment, military service, place of birth, etc.) in each state:

<u>State/Country</u>	<u>Dates of Residence</u>	<u>Reason for Residing in State/Country</u>
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5) Please list the names of all schools you have attended after high school and the dates of attendance for each. Do NOT include college courses taken during high school. If you withdrew from college during a term because you were called to active military service after December 31, 2002, please make note of this.

<u>Name of College</u>	<u>Dates of Enrollment</u>
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6) _____
 Student Signature Date