



## Student Financial Aid Profile

**Student:** A Financial Aid representative at your college or university must complete a portion of this document. Once completed, please email it to [internships@countrymusichalloffame.org](mailto:internships@countrymusichalloffame.org) by the application deadline: **Tuesday, July 1, 2025.**

Student Name: \_\_\_\_\_ Student Email: \_\_\_\_\_

College/University: \_\_\_\_\_ Internship Semester: \_\_\_\_\_

Desired Internship: \_\_\_\_\_

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### TO BE COMPLETED BY COLLEGE/UNIVERSITY FINANCIAL AID OFFICE

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**Financial Aid Representative:** Please base the following numbers on a single term of enrollment only. If aid for the current or upcoming term has not yet been determined, use the numbers from the most recent available term. **Return this form to the student or scan and email it to [internships@countrymusichalloffame.org](mailto:internships@countrymusichalloffame.org).**

1. Total grant dollars awarded to student (not including loans) for academic and housing needs. (Pell Grants, SEOG, institutional grants, etc.): \$ \_\_\_\_\_

Is this student a Pell Grant recipient?

☐ Yes ☐ No

2. Estimated family contribution (please use federal methodology): \$ \_\_\_\_\_

☐ Single Term EFC  
☐ Academic Year EFC

Please check if appropriate: ☐ No FAFSA on record ☐ International student

Financial Aid Officer Signature: \_\_\_\_\_

Name (printed): \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_