

FOOTHILL COLLEGE
FINANCIAL AID OFFICE
12345 El Monte Rd
Los Altos Hills CA 94022-4599

DE ANZA COLLEGE
FINANCIAL AID OFFICE
21250 Stevens Creek Blvd
Cupertino, CA 95014-5793

EDUCATIONAL GOAL

Applicant's Name _____ SID _____
Last First

Check ONE option below that best describes your educational goal at Foothill or De Anza College.

If your goal is not listed, please contact the Admission and Records office to get help on updating your educational goal. You need to see your counselor to develop an Educational Plan for your goal.

___ AA/AS degree

Please indicate major _____

___ Transfer

Please indicate which general field _____ Arts and Letters (ALE)

_____ Social and Behavioral Sciences (SBS)

_____ Business and Computer Info Systems (BCI)

_____ Science, Math and Engineering (SME)

I certify that I am currently pursuing the above academic goal and authorize the Financial Aid Office at my campus to update my record. I understand that the classes I enroll in should reflect the pursuit of this goal for financial aid eligibility. I also understand that this form doesn't include all of the goals available for students at Foothill or De Anza College.

Student's signature

Date