

## Application for Financial Aid - Summer 2024

Complete this form and return to the Student Financial Services (SFS) Office at the time of course registration.

**NOTE:** Six credits is the minimum summer enrollment for financial aid eligibility. Summer financial aid is available on a limited basis and generally consists of student loans. On a more limited basis, some students may be eligible for federal or state grant consideration. You will be notified in writing of your financial aid eligibility.

First Name	MI	7 digit	SU ID#			SU Grad Yr
::						
With Paren	ts/Relatives					
Other-Plea	se describe:					
	Curre	nt Addre	ess - Street	(write "sar	ne" if sai	me as summer)
State Zip	City			State	Zip	
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Course # and Cred			Intensive	I Inter	nsive II	Regular
Course # and Cred			Intensive I Intensive I		nsive II	Regular
Course # and Cred	lits S	elf-	Intensive I Intensive II		nsive II	Regular
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Date

Student Financial Services 514 University Ave Selinsgrove, PA 17870 P: 570-372-4450 F: 570-372-2722 sfs@susqu.edu

Signature



## PLEASE COMPLETE THIS PAGE ONLY IF YOU ARE TAKING A SUMMER COURSE(S) AT A COLLEGE OTHER THAN SUSQUEHANNA UNIVERSITY.

Non-Susquehanna Course Information: If you are not taking all of your courses at Susquehanna, please list all of the schools that you plan to attend, the courses that you will be taking and the total number of credits you intend to earn at each school during the summer.

1Name of Visited School							
Address	City	State	Zip				
Course Title(s)		# Credits					
First day of class	Last day of class						
M/D/Y		M/D/Y					
Financial Aid Contact Person at Visited School School	Phone Number of	Phone Number of Financial Aid Contact at Visited					
** NOTE: Forward a copy of your bill from the	e visited school.						
2							
Name of Visited School							
Address	City	State	Zip				
Course Title(s)	#	# Credits					
First day of class	Last day of class						
First day of classM/D/Y		M/D/Y					
Financial Aid Contact Person at Visited School School	Phone Number of	Phone Number of Financial Aid Contact at Visited					
** NOTE: Forward a copy of your bill from the	e visited school.						
Please note that courses not taken at Susque Registrar for transfer credit. If you list a collection this form.							
Susquehanna Registrar Signature (if student is enr	rolling at another school)		Date				
In order to have this credit transferred to you official transcript sent to the Susquehanna Off		, ,					
To the best of my knowledge, the information Financial Services and the Office of the Registration							
Student Signature		1	Date				
MAIL TO: Student Financial Services 514 University Ave. Selinsgrove, PA 17870							

Email To: sfs@susqu.edu