

# Graduate Programs Supplemental Financial Aid Form 2022-2023



## Personal Data

Student Name \_\_\_\_\_ Student ID \_\_\_\_\_  
*Last First M.I.*

Address \_\_\_\_\_  
*Number and Street City State Zip Code*

Phone # \_\_\_\_\_ Email \_\_\_\_\_ @ \_\_\_\_\_

## Academic Information

Degree Program: \_\_\_\_\_

Please indicate the intended number of credits per semester.

Fall: \_\_\_\_\_ Spring: \_\_\_\_\_

Please put a zero (0) for any semester you are not planning on attending.

NOTE: A minimum of 5 credits are required to be eligible for federal loans, per semester.

## By signing below, I understand the following:

- It is my responsibility to inform the Financial Aid Office of any changes to my attendance.
- Failure to register for the indicated number of credits will change my financial aid eligibility and potentially lead to withdrawal and an owing balance with the University.
- It is my responsibility to notify the Financial Aid Office if I will be graduating prior to May 2023.

Student Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_