

IMPORTANT:

Return to:
Your Academic Advisor
 Phone: (603) 513-1392
 Fax: (603) 513-1386

You are nearing the end of your degree program. We need to know your enrollment plans to properly award you financial aid.

Last Name _____	First Name _____	Middle Initial _____
GSC Student ID # _____	Date of Birth _____	Phone Number _____

Enrollment Plan

My plan for enrollment for the 2018-2019 GSC academic year will be:
 Indicate the number of courses and credits you plan to enroll in for each term. **Indicate '0' for the terms you will not attend.**

	# of Courses	# of Credits
Summer 2018		
Fall 2018		
Winter 2019		
Spring 2019		

Award Requested

1. Decline my Federal Direct Loan for the following terms:
- | | | | | |
|----------------------------|---------------------------------|-------------------------------|---------------------------------|---------------------------------|
| Subsized Stafford Loan | <input type="checkbox"/> Summer | <input type="checkbox"/> Fall | <input type="checkbox"/> Winter | <input type="checkbox"/> Spring |
| Unsubsidized Stafford Loan | <input type="checkbox"/> Summer | <input type="checkbox"/> Fall | <input type="checkbox"/> Winter | <input type="checkbox"/> Spring |

OR

2. Cover the cost of the following (based on the number of credits indicated above):
- Tuition Fees (Academic and Registration only) Books

OR

3. Increase my loans to allow for additional funding above and beyond tuition, fees and books. Please indicate the additional amount requested or write "max" for maximum eligibility in each term you're looking for additional aid:

\$ _____ for Summer \$ _____ for Fall \$ _____ for Winter \$ _____ for Spring

4. Cover the cost of my additional fees (Please indicate which term they will be assessed and the amount):

	Term(s)	Amount
<input type="checkbox"/> Mentoring Fees	_____	\$ _____
<input type="checkbox"/> Prior Learning Assessment Fee*	_____	\$ _____
<input type="checkbox"/> Intent to Graduate Fee*	_____	\$ _____

*NOTE: We require your authorization to use federal funds to pay the Intent to Graduate and Prior Learning Assessment fees. You can authorize this through the direct deposit sign up process on WebROCK or by submitting the Federal Title IV Financial Aid Payment Authorization Form. Otherwise the college will not be able to apply the credit balance directly to these fees and will instead refund the student.

Comments: _____

I understand the following:

1. Completion of this form does **not** guarantee the changes I have requested. The FA office will do everything possible to fulfill my revision request within the regulatory limitations. *Know your limits and how much you've borrowed. Visit www.NSLDS.ed.gov to view your total federal loan amounts.*
2. My award will be adjusted down to cover my actual enrollment after the add/drop period if my enrollment is different from what is indicated on this form.
3. Enrolling in a late-starting/second 6-week course may delay any refund I request.

Student Signature _____ Date _____

For Advisor Use Only

Number of credits remaining to earn for degree completion as of today _____

Current program: Associate Bachelor's Post-Baccalaureate Graduate

I have discussed any changes to the enrollment plan with the student.

Advisor Signature _____ Date _____