



Summer 2007 – REQUEST FOR FINANCIAL AID

Please Print Clearly in Dark Blue or Black Ink

STUDENT INFORMATION

 Last Name First MI

 CWID E-mail Address

PLEASE NOTE: The minimum enrollment requirement to be eligible to receive summer financial aid is half-time enrollment. Check all that apply.

ENROLLMENT STATUS

- I will enroll in _____ credit hours for the **Summer I** semester (meets from June 4 - July 5, 2007).
- I will enroll in _____ credit hours for the **Summer II** semester (meets from July 9 - August 9, 2007).
- I will enroll in one or more **10 week** courses (meets from June 4 – August 9, 2007).
- I will enroll in one or more **7 week** courses (meets from June 4 – July 24, 2007).
- I will enroll in one of the **International Studies** programs and understand that I must schedule an appointment with my Financial Aid Advisor.
- I am **graduating May 2007** and understand that I must be readmitted in a degree seeking program to continue to receive financial aid. I must also schedule an appointment with my Financial Aid Advisor.

I understand that:

- The priority deadline for summer 2007 financial aid is **FEBRUARY 15, 2007**.
- I will be notified via *myLEO* email of the status of my request.

 Student Signature Date

With few exceptions, you have the right to request, receive, review and correct information about yourself collected by this form.

Office of Financial Aid, P.O. Box 3011, Commerce, TX 75429-3011
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