



Financial Aid Office

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2017-2018 SUMMER ENROLLMENT FORM

(Summer is the first quarter of Skagit Valley College's (SVC) 2017-2018 academic year. You must have a 2017-2018 FAFSA application completed for SVC, and be enrolled in summer classes to complete this form.)

Name

SS #

SID #

Your cost of attendance and financial aid award are based on your enrollment level. Please complete and submit this form so that we can award you accordingly.

Summer quarter is limited to Pell Grant and Direct loans only, unless you are eligible for Washington State College Bound Scholarship.

This form will not be processed for summer quarter if it is received after the census date (3rd day of the quarter).

Please award my financial aid accordingly for Summer quarter 2017:

Enrollment Level		Estimated Grant Reduction**
<input type="checkbox"/> Full-Time	12+ Credits	--
<input type="checkbox"/> ¾ Time	9-11 Credits	25% of Full-Time Award
<input type="checkbox"/> ½ Time	6-8 Credits	50% of Full-Time Award
<input type="checkbox"/> Less than ½ Time*	1-5 Credits	Contact the Financial Aid Office
<input type="checkbox"/> Will not attend		

*Students who enroll less than ½ time are not eligible for Direct Loans.

**Grants subject to reduction include Pell Grant, State Need Grant and College Bound.

Please note that reducing your enrollment may reduce the amount of financial aid you will receive for the quarter. If your financial aid has already disbursed, please note that changes to your enrollment may result in a bill based on overpayment of funds. You will be notified by the Skagit Valley College Business Office, should this occur.

SELF-PAYMENT FOR COURSEWORK NOT REQUIRED FOR PROGRAM

Your financial aid is based on the number of credits you are enrolled in that are required for your program. If you wish to take a non-required course **at your own expense**, this course will not be included in your enrollment level for determining your financial aid eligibility. You must notify our office by completing this form prior to the disbursement of your aid for the quarter noted above.

I wish to take the following class(es) **at my own expense**: _____

CERTIFICATION

*I understand that submitting this form electronically as an email attachment **using my SVC email account** constitutes my signature and my certification that the information provided here in is complete and correct.*

Once completed, this form may be submitted via your mySVC email account, to financial.aid@skagit.edu. Note: this email address is for document submission only.

Student Signature

Date

SVC FINANCIAL AID OFFICE USE ONLY

SE	<input type="checkbox"/> Adj FAM Awd/Subcode	<input type="checkbox"/> Track SE/CR	<input type="checkbox"/> Check PA	INITIALS & DATE:
	<input type="checkbox"/> Adj FAM Budg Code/Amt/Enrl	<input type="checkbox"/> Reg showing FA?		