



2405 E. College Way – Lewis 121 Mount Vernon, WA 98273

Phone: MV-360.416.7666/WIC-360.679.5320

Fax: MV-360.416.7886/WIC-360.679.5375

2023-2024 SUMMER ENROLLMENT FORM

You must have a 2023-2024 FAFSA application completed and received by SVC, <u>and</u> be enrolled in summer classes to complete this form.

classes to complete this form.			
IMPORTANT: Due to disbursement restrictions and the 4 th of July holiday, the earliest you can expect to receive financial aid refunds for summer quarter is the <u>afternoon of the first day of the quarter</u> . Student Federal Direct Loan funds will likely be later. You should be prepared to purchase materials out of pocket to start summer quarter if you wish to obtain your course materials prior to the start of the quarter.			
Name	ctcLink Student ID #		
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, 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.			
This form will not be processed for summer quarter if it is received after the census date (10 th day of the quarter).			
☐ I am planning to graduate at the conclusion of Summer quarter 2023.			
Please award my financial aid accordingly for Summer quarter 2023			
Enrollment Level		Estimated Grant Reduction	
☐ Full-Time	12+ Credits		
☐ ¾ Time	9-11 Credits	25% of Full-Time Award	
☐ ½ Time	6-8 Credits	50% of Full-Time Award	
☐ Less than ½ Time*	1-5 Credits	Contact the Financial Aid Office	
☐ Will not attend			
*Students who enroll less than ½ time are not eligible for Direct Loans.			
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.			
ones completely and form may be submitted the your myste chain account, to interiorisate stagistical.			
Student Signature Date		Date	

SVC FINANCIAL AID OFFICE USE ONLY

INITIALS

& DATE:

☐ Adj FAM Awd/Sub ☐ Track SE/CR ☐ Check PA ☐ DL? ☐ E1/H1-H2

☐ Adj FAM Budg Code/Amt/Enrl ☐ Yr Rd PELL Ind ☐ Reg showing FA?

SE