



# Application for Financial Aid - Summer 2025

Complete this form and return to the Student Financial Services (SFS) Office at the time of course registration.

**NOTE:** Six credits is the minimum summer enrollment for financial aid eligibility. Summer financial aid is available on a limited basis and generally consists of student loans. On a more limited basis, some students may be eligible for federal or state grant consideration. You will be notified in writing of your financial aid eligibility.

### Student Information:

\_\_\_\_\_  
Last Name                      First Name                      MI                      7 digit SU ID#                      SU Grad Yr

### Summer housing status:

\_\_\_\_\_ On Campus      \_\_\_\_\_ With Parents/Relatives  
\_\_\_\_\_ Off Campus      \_\_\_\_\_ Other-Please describe: \_\_\_\_\_

\_\_\_\_\_  
Summer Address - Street                      Current Address - Street (write "same" if same as summer)

\_\_\_\_\_  
City                      State      Zip                      City                      State      Zip  
(      )                      (      )  
Home Phone                      Cell Phone

**Class/Credit Information:** List all the Susquehanna courses in which you plan to enroll and the number of credits for each. Check the correct session for each course in which you are enrolled: Intensive Session I, Intensive Session II and/or Regular Session.

Course Title	Course # and Credits	Self-Paced	Intensive I	Intensive II	Regular
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total number of Susquehanna credits for which you will enroll Summer 2025: \_\_\_\_\_

Note: If any summer course will be taken at any school other than Susquehanna you MUST complete the next page.

I understand that in order to be evaluated for summer financial aid, my 2025-2026 Financial Aid application must be complete. To the best of my knowledge, the information that I am providing is accurate. I will contact the Student Financial Services Office and Office of the Registrar if there are any changes to the above information.

Student Financial Services Staff to fill out this section	
Tuition:	_____
Fees:	_____
Room:	_____
Board:	_____
Books:	_____
Personal:	_____
Trans.:	_____
Total:	_____

Student Financial Services  
514 University Ave  
Selinsgrove, PA 17870  
P: 570-372-4450  
F: 570-372-2722  
sfs@susqu.edu

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



PLEASE COMPLETE THIS PAGE ONLY IF YOU ARE TAKING A SUMMER COURSE(S) AT A COLLEGE OTHER THAN SUSQUEHANNA UNIVERSITY.

Non-Susquehanna Course Information: If you are not taking all of your courses at Susquehanna, please list all of the schools that you plan to attend, the courses that you will be taking and the total number of credits you intend to earn at each school during the summer.

1. \_\_\_\_\_
Name of Visited School
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Course Title(s) \_\_\_\_\_ # Credits \_\_\_\_\_
First day of class \_\_\_\_\_ Last day of class \_\_\_\_\_
M/D/Y M/D/Y
( )
Financial Aid Contact Person at Visited School \_\_\_\_\_ Phone Number of Financial Aid Contact at Visited School \_\_\_\_\_

\*\* NOTE: Forward a copy of your bill from the visited school.

2. \_\_\_\_\_
Name of Visited School
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Course Title(s) \_\_\_\_\_ # Credits \_\_\_\_\_
First day of class \_\_\_\_\_ Last day of class \_\_\_\_\_
M/D/Y M/D/Y
( )
Financial Aid Contact Person at Visited School \_\_\_\_\_ Phone Number of Financial Aid Contact at Visited School \_\_\_\_\_

\*\* NOTE: Forward a copy of your bill from the visited school.

Please note that courses not taken at Susquehanna University must be pre-approved by the Office of the Registrar for transfer credit. If you list a college other than Susquehanna, Susquehanna's registrar must sign this form.

\_\_\_\_\_  
Susquehanna Registrar Signature (if student is enrolling at another school) Date

In order to have this credit transferred to your Susquehanna record, you must arrange to have an official transcript sent to the Susquehanna Office of the Registrar at the end of the summer session.

To the best of my knowledge, the information that I am providing is accurate. I will contact the Student Financial Services and the Office of the Registrar staff by JUNE 15, 2025, if there are any changes.

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

MAIL TO:
Student Financial Services
514 University Ave.
Selinsgrove, PA 17870