PLEASE PRINT CLEARLY!

SID:										

MORGAN STATE UNIVERSITY
2018 WINTER MINIMESTER FINANCIAL AID APPLICATION

TO BE COMPLETED BY STUDENT

LAST NAME:	**FIRST NAME:**	**MI:**

WINTER MAILING ADDRESS (INCLUDE CITY, STATE, ZIP CODE)**:**	**TELEPHONE #:** ( )
	EMAIL:

⬡ UNDERGRADUATE ⬡ GRADUATE	**TOTAL CUMULATIVE EARNED CREDIT HOURS:**	**DID YOU RECEIVE FINANCIAL AID FOR:** FALL 2017 ⬡ YES ⬡ NO SPRING 2018 ⬡ YES ⬡ NO

Where will you reside during the winter? ⬡ On Campus ⬡ Off Campus ⬡ At Home with parents

TYPE OF LOAN: FDL $_____ ALN $_____ PLUS $_____

IF YOU BORROWED LESS THAN THE LIMIT FOR YOUR GRADE LEVEL DURING THE 2017-2018 ACADEMIC YEAR, YOU MAY BE ELIGIBLE TO BORROW YOU'RE REMAINING ELIGIBILITY TO ASSIST WITH THE COSTS OF YOUR WINTER ENROLLMENT.

ENTER THE NUMBER OF CREDIT HOUR PURSUING**:**

⬡ WINTER MINIMESTER (JAN 3 – JAN 18)

Undergraduate # of credits _____
(Minimun 6 credits for federal loans)
Graduate # of credits _____
(Minimun 5 credits for federal loans)

_____
Initials

I UNDERSTAND THAT MY WINTER FINANCIAL AID AWARD(S) AT MORGAN STATE UNIVERSITY REQUIRE THAT I REGISTER FOR AND MAINTAIN AT LEAST HALF-TIME CREDIT HOURS FOR FEDERAL LOANS. ANY CHANGE IN MY SCHEDULE WILL RESULT IN REDUCTION OR TOTAL CANCELLATION OF ANY AND ALL FINANCIAL AID AWARDS. I ALSO UNDERSTAND THAT MY WINTER FEDERAL FINANCIAL AID AWARD WILL DECREASE MY SPRING 2018 FEDERAL FINANCIAL AID.

SIGNATURE: _____ DATE: _____

COMPLETE AND RETURN BY: **DECEMBER 15, 2017**

TO: **OFFICE OF FINANCIAL AID MONTEBELLO COMPLEX, ROOM A-203 BALTIMORE, MARYLAND 21251**