



SIMMONS COLLEGE STUDENT INFORMATION FORM 2017-2018

ONLINE PROGRAMS – MBA, HEALTH CARE MBA, PUBLIC HEALTH,
APPLIED BEHAVIORAL ANALYSIS

Name: _____ Simmons ID (if known): _____

Address: _____
Street Apt City State Zip

Phone: _____ Email: _____ Date of Birth: _____

ENROLLMENT PLANS

Enter the exact number of credits you plan on taking each term.
If you are unsure, you can review the course sequence on your program's website.

TERM	STARTING	EXACT NUMBER OF CREDITS (enter 0 if not attending)
SUMMER 2017	JUL 2017	
FALL 2017	OCT 2017	
WINTER 2018	JAN 2018	
SPRING 2018	APR 2018	

- **Exact Number of Credits:** Enter 0 for any term that you will not be attending. Each row designates a term and must contain a number. Enter the exact number of credits for each term. If you are unsure, you can review the course sequence on your program's website.
- **Summer 2018 Term:** This will be the start of the 2018-19 financial aid year. No need to report Summer 2018 enrollment on this form.

SCHOLARSHIP, GRANT, OR BENEFIT FROM AN EXTERNAL AGENCY

External Assistance \$ _____ Source _____

External Assistance \$ _____ Source _____

If you receive a scholarship, grant, or military benefit from any source outside of Simmons College, you are required to notify Student Financial Services by submitting a copy of the letter or certificate from the agency.

POLICIES

- **HALF-TIME ENROLLMENT:** You must be enrolled at least half-time and admitted to a degree-seeking program in order to qualify for federal aid. If you enroll less than half-time or are not admitted to a degree-seeking program, you are not eligible for most types of financial aid. **HALF-TIME** is defined as registering in a minimum of 5 credits in a term. You may not combine credits from different terms to arrive at half-time status.
- **LOAN DISBURSEMENTS AND REFUNDS:** Loan disbursements occur 3-4 weeks after the start of classes each term. You will receive an email from sfs@simmons.edu notifying you when the loans have disbursed. If you are due a refund, it will be mailed to your billing address within 10 (ten) business days of the disbursement date.

SIGNATURE AND CERTIFICATION

PLEASE READ THIS SECTION CAREFULLY

- I understand that by signing this form that all information provided is complete and correct to the best of my knowledge.
- I understand my intended course track as reported on the first page of this form will be used to determine my eligibility for financial aid. If my plans change, I will notify Student Financial Services in writing to confirm if the change will impact my eligibility.
- I understand that if I do not notify Student Financial Services of changes to my enrollment, my actual enrollment will be reviewed at the end of the add/drop registration period and my financial aid will be adjusted at that time, if necessary.
- I understand that reporting incorrect or inaccurate information on this form may result in a change to my financial aid award.
- I understand that the omission of any information on this form may result in a delay in the receipt of my financial aid award.
- I understand that by signing this form, I authorize Simmons College to release my financial and/or academic information to outside agencies for the purpose of processing any benefit I may receive from those agencies.
- I understand that in order to be awarded financial aid, I must submit a FAFSA (Free Application Federal Student Aid) in addition to this form. The FAFSA can be completed at fafsa.ed.gov.
- I understand that I may be asked to supply additional information (e.g., Federal Income Tax Returns and W-2's) to complete my financial aid file and that I cannot receive financial aid without a complete application.

Student Signature: _____ **Date:** _____