

Consortium Financial Aid Information Form – LSSU

This form must be filled out each semester before your financial aid can be disbursed. All of your current NCMC courses must be verified as necessary for your Baccalaureate degree at LSSU to receive federal financial aid. An electronic copy of your Free Application for Federal Student Aid (FAFSA) must list Lake Superior State University (#002293) and be available at LSSU before aid can be awarded.

Student Use:

Complete all items for current semester: (Fall, Spring, Summer/Year): _____

1. Student Name: _____ Social Security Number: _____ - _____ - _____
2. Number of Lake Superior State University enrolled credits for this semester: _____
3. Number of North Central Michigan College enrolled credits for this semester: _____
4. Have you earned an Associate degree and the MACRAO stamp or 88 credits that have transferred to LSSU?
Yes _____ No _____ (If No, you are not eligible for financial aid from LSSU under the consortium agreement (using semester credits from both institutions)).
5. Do you reside with your parents? Yes _____ No _____
6. Are you eligible for the Native American Tuition Waiver? Yes _____ No _____
(If Yes, first time LSSU students must provide documentation to LSSU)
7. Will you receive any financial aid from NCMC this semester? Yes _____ No _____
Are you eligible for any tuition reimbursement/waiver? (i.e. from employer, National Guard, MI-Works, Voc. Rehab, Veteran's Benefits) Yes _____ No _____
(If Yes, please provide documentation).
8. Are you charged community college in-district rate? Yes _____ No _____

As a consortium student, I authorize the appropriate staff members of the financial aid, business and registrar offices and regional center offices at LSSU and North Central Michigan College to exchange information on my application, discuss my financial aid and provide each other with necessary academic information such as hours attempted, hours completed and course grades each semester so that satisfactory progress can be determined. I understand that federal financial aid requires attendance in each class in which I receive aid. I further understand that to qualify for a 100% withdrawal and any tuition refund where appropriate at LSSU, I must drop all of my classes at both institutions and may be required to repay my federal financial aid. I authorize NCMC to submit a copy of my transcript to LSSU each semester for Satisfactory Academic Progress monitoring purposes.

Student Signature: _____ Date: _____

Further Instructions:

Attach a copy of your current semester class schedule showing enrolled credits at NCMC and deliver to the LSSU Regional Center director with this completed form. The appropriate Dean's Office or the Regional Center Director must verify that the NCMC classes apply to your LSSU degree before aid can be disbursed. Any potential excess aid refunds will be delayed until all forms are on file and all verifications are completed.

Do not write below this line.

Department Chair or Regional Center Director's Office Use:

Does student meet the Consortium Agreement qualifications?

Yes _____ No _____ **If Yes, complete one set of conditions below:**

Earned Associate Degree? Yes _____ No _____ If Yes, where? _____

AND

Earned MACRAO Stamp? Yes _____ No _____

OR

Earned minimum of 88 credits applicable toward LSSU Baccalaureate degree?

Yes _____ No _____ **If Yes, where? _____ (transcript must be on file)**

Review of courses for current semester:

Current semester (Fall, Spring, Summer/Year): _____

LSSU Credit Hours: _____

Credit Hours from North Central Community College applicable to LSSU degree: _____ List any non-applicable courses? _____

Total hours toward degree this semester from NCMC and LSSU: _____

LSSU designee's signature: _____ Date: _____

Once completed, please send a copy of this form to the Financial Aid Office at LSSU. If this is the student's first semester completing this form, please send a copy of the front page of this form to the Registrar at NCMC for FERPA compliance for grade release.