



STUDENT INFORMATION FORM 2017-2018

ONLINE PROGRAMS – NURSING@SIMMONS AND SOCIALWORK@SIMMONS

Name: _____ Simmons ID (if known): _____

Address: _____
Street Apt City State Zip

Phone: _____ Email: _____ Date of Birth: _____

ENROLLMENT PLANS

TERM	ENROLLMENT PERIOD	EXACT NUMBER OF CREDITS (enter 0 if not attending)	CLINICAL or FIELD PLACEMENT?
SUMMER 2017	<input type="checkbox"/> Starting May 2017		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Starting Jul 2017		
FALL 2017	<input type="checkbox"/> Starting Sep 2017		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Starting Nov 2017		
SPRING 2018	<input type="checkbox"/> Starting Jan 2018		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Starting Mar 2018		

- **Enrollment Period:** There are 2 concurrent periods of enrollment for each term. Choose only one period of enrollment for Summer, Fall, and Spring.
- **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.
- **Bridge Term:** Nursing@Simmons students taking the Bridge Term should complete the section at the bottom of this page. *Do not include the Bridge Term in the table above.*
- **Summer 2018:** This will be the start of the 2018-2019 financial aid year. No need to report Summer 2018 enrollment on this form.

NURSING@SIMMONS STUDENTS ONLY

BRIDGE TERM

If you are attending the Bridge Term, indicate when you plan on taking it in 2017-18. Check one:

- | | |
|---|--|
| <input type="checkbox"/> March 2017 | <input type="checkbox"/> May 2017 |
| <input type="checkbox"/> September 2017 | <input type="checkbox"/> November 2017 |
| <input type="checkbox"/> January 2018 | <input type="checkbox"/> March 2018 |

IMMERSION WEEKEND

Check the Immersion Weekend you will be attending. NOTE: Leave blank if not attending the weekend in the 2017-18 year.

- | | |
|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Aug 2017 | <input type="checkbox"/> Oct 2017 |
| <input type="checkbox"/> Jan 2018 | <input type="checkbox"/> Mar 2018 |
| <input type="checkbox"/> Apr 2018 | <input type="checkbox"/> Jul 2018 |

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 in Week 3 of 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: _____