

2018-2019 Summer Application

Office of Financial Aid & Scholarships

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INTERNAL USE ONLY:

College Connect Financial Aid Advisor: Jessica Lee SUNO: Bashful Adm. Bldg, Rm 210 SUBR: Stewart Hall, Rm 107 Phone: 225-771-2208 • Fax: 225-771-4954 Email: financialaid@susla.edu

Financial Aid Summer Application satisfy requirement: SUMAPP

Please complete entire form and return to the Office of Student Financial Aid <u>Processing cannot continue without this form</u>

			900		
LAST NAME	FIRST NAME		M.I.	SUSLA ID#	
Address		APT#	City	State	Zip Code
HOME PHONE (INCLUDE AREA CO	DE)			Date	e of Birth
Which semesters did you	ı attend Southern	University at Shrev	report? (Check all th	at apply)	
Fall 2018		Spring 2019	March 2019 (B-Term, 8 weeks)		
Will you receive a Fee Exe □ No □Yes If yes, please specify	mption, Tuition Wa	aiver, and/or a Scholar	ship during any o	f the summer terr	ns?
How many credit hours will		or: nmer II Summe	· III 2		
(i.e., Fall 2018 and/or Spring Have all final official transcript If yes, list the institution(s): 1)	s been submitted to an	Yes d evaluated by SUSLA's (2)	Office of Admissions	?	
Summer Course(s)					
Session (I, II, or III)	CRN		Course Title		Credit hours
Admissions stat You have not be	eting Satisfactory ed as being in a " us. een admitted as a ed the max aggre	y Academic Progres Special Program" a certificate or degre egate limits for Pell	ss (SAP) in acco and/or "Summe ee-seeking stude	rdance with the r Only Student [*] ent.	e SAP Policy " according to your
Signature and Cert	ification				
PLEASE READ AND SIGN You must have a complet All first time loan borrows	I BELOW ed 1819 FAFSA apı				
Student Signature				Date	