

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

Summer 2017 Adjustment to Cost of Attendance for Education Abroad Program(s)

	NAME		NU ID#	
	E-Mail			
	To determine your eligibility for federal financial aid and/or university scholarships while participating in a recognized University of N Lincoln education abroad program the following items must be completed.			raska-
	 Complete the Free Application for Federal Student Aid (FAFSA) to determine eligibility for federal financial aid programs. The Education Abroad Office should approve the program you plan to attend or begin the approval process. Once you haccepted to the program, complete and return this worksheet to the Office of Scholarships and Financial Aid. Make an appointment with the Office of Scholarships and Financial Aid to discuss your financial aid/scholarships with an abroad financial aid advisor. Complete all documents required by the Education Abroad Office and the Office of Scholarships and Financial Aid prior to departure. Program When Faculty In the Education Abroad Office and the Office of Scholarships and Financial Aid prior to departure. Program When Faculty In the Education Abroad Office and the Office of Scholarships and Financial Aid prior to departure. Program When Faculty In the Education Abroad Office and the Office of Scholarships and Financial Aid prior to departure. Program When Faculty In the Education Abroad Office and the Office of Scholarships and Financial Aid prior to departure. Program When Faculty In the Education Abroad Office and the Office of Scholarships and Financial Aid. Number of Credit Hours for Program In the International Aid prior to departure. I will be registering for my study abroad hours in this session: Pre 8-week 1st 5-week 2nd 5-week Mineral Aid Program 1st 5-week 2nd 5-week Mineral Aid Program 2nd 5-week 2nd 5-wee			ave been education o 4440444
	Estimate	ed Program Costs	OSFA Office Use Only	
st M	Tuition/Fees	s_ 1,180,25	RegPOA	
	Room/Board	4,189.45	Program Cost	
	Books/Supplies	\$ <u>WIA</u>	Minus UNL Cost	
	Travel Expenses	\$ 1,650.00	Increase	***************************************
	Misc. Expenses	\$	Adj. Done/Date	
	Total	s 7,620.70		
	Nonresident Tuition Rates Apply			
	By signing this form, I (the student) understand that program costs owed to the Education Abroad Office will be deducted from my scholarships, state and federal aid prior to the Office of Student Accounts processing any refund.			
	I further understand that for University scholarship eligibility and/or renewability, I must validate credits from my study abroad experience.			
	Student Signature		Date 3/30/20)/7
	Education Abroad Office Signature Alle			