

ROGER WILLIAMS UNIVERSITY
SCHOOL OF LAW-MASTERS PROGRAM
APPLICATION FOR SUMMER FINANCIAL AID

1. NAME _____ ss# _____
or student ID # _____

ADDRESS _____

PHONE # _____

2. I am a Law/Graduate student requesting an increase in my cost of Attendance to cover the cost of the summer classes. I intend to take _____ credits. (Please note you will only be eligible for Federal funds if you take 5 credits or more – if you are taking less than 5 credits, you will have to apply for private loans).

3. I understand that if I fail to register for class or decide not to participate in the program indicated, my funds will be refunded to my lender. If I withdraw after having received a refund, my funds will be refunded to the lender and I will owe the school for the amount I have received – plus any other charges. Refunds will only be available following the summer add/drop date.

I further certify that all information on this form is true and complete to the best of my knowledge. I understand information provided on this form requiring correction my result in changes to my final award letter.

Signature _____ Date _____

For office use only:

Amount of Aid you are eligible for: _____

Comments: _____

