



2017-2018 Undergraduate Credits Per Semester

Name (Print): _____ PSU ID #: _____

Phone #: _____ Last 4 digits of Student's Social Security Number: _____

Please provide the specific number of credits for which you will be enrolled each term.*

- Do not enter a range of credits.
- Do not leave any term blank. If not enrolled for a term please enter “0”.
- Do not use check marks or an (X).

Summer 2017	
Fall 2017	
Winter 2018	
Spring 2018	

*These credits must match your enrollment or your aid will not disburse. If enrollment information changes during the academic year, you must provide written notification of the changes to the Financial Aid Team so your Federal aid eligibility can be reviewed and adjusted, if necessary. **PSU requires all students to complete Verification four weeks prior to the end of the term for which aid is requested.**

All financial aid information specific to your account is accessible through the myFinances Channel in myPlymouth under the Services tab.

Signature: _____ Date: _____

(Electronic signatures will not be accepted.)

Return completed form to: *PSU Financial Aid Team
17 High Street, MSC #18
Plymouth, NH 03264
Fax: (603) 535-2627, Phone: (603) 535-2338 or (877) 846-5755
plymouth.edu/finaid – finaid@plymouth.edu*