

Date

Total Yearly Cost

Complete the form fully. Visit <u>www.ohio.edu/financial-aid/forms</u> for directions on submitting your forms using our Secure Upload Portal, mailing, or faxing.

Student Name

Aviation Program Advisor Signature Required

Student PID (Pxxxxxxxx)

This form must be signed by an Aviation Advisor and the student.

The above-mentioned student is enrolled in the aviation program at Ohio University. The student will be taking the following aviation courses during the 2024-2025 academic year. Please increase the student's budget by the cost of the following classes:

Summer 2024			
	Course ID(s)	Total Cost	
Fall 2024			
	Course ID(s)	Total Cost	
Spring 2025			
	Course ID(s)	Total Cost	

To pay these costs, I intend to (please check one of the following):

- □ Borrow a private student loan,
- □ Borrow a Parent PLUS loan,
- □ Pay out of pocket,
- \Box I'm not yet sure.

Student Agreement

My plan is to enroll and complete all of the above courses in the 2024-2025 academic year. **If I am unable to enroll or complete any one of these courses I will contact the Office of Student Financial Aid and Scholarships** so that my financial aid advisor may adjust my student budget and/or financial aid appropriately. I also understand that if I receive a refund for any portion of my course cost, I may be obligated to repay part or all of the additional financial aid received for that course.

Student Signature Required

Date

Office of Student Financial Aid and Scholarships
Chubb Hall 020
10hio University Drive
Athens, OH 45701-2979

DO NOT SEND COMPLETED DOCUMENTS BY EMAIL. PLEASE USE OUR SECURE UPLOAD PORTAL OR SEND BY MAIL OR FAX. https://www.ohio.edu/financial-aid/forms Questions? financial.aid.verification@ohio.edu Phone: (740) 593-4141 Fax: (740) 593-4140