

2500 Student Activities Bldg. • 515 E. Jefferson St. • Ann Arbor, MI 48109-1316 • tel: 734-763-6600 • fax: 734-647-3081 • email: <u>finaid.abroad@umich.edu</u> • web: <u>finaid.umich.edu</u>

## STUDY ABROAD FINANCIAL AID REQUEST

## **WINTER TERM**

If you will study abroad in a U-M program for the winter term, you must fill out this form to request financial aid. Both sections of the form must be completed and signed before it is submitted to the U-M Office of Financial Aid (OFA). A U-M program is defined as one for which you enroll through the University of Michigan. A non-UM program is one for which you enroll at another university, agency, or institution.

Student name						U-M ID (eight digits)			
Program (check one):	CGIS	IPE	Ross	Stamps	Nursing	Kinesiology	Other:		
SECTION A: TO BE COM	PLETED E	BY STUDY	Y ABROAD	PROGRAM /	ADVISOR				
Study abroad program	name:					Location: _			
Program dates: Start: _ U-M tuition charged	No	o U-M tu	ition	End:					
Printed study abroad p	rogram ac	dvisor na	ame:						
Study abroad program	advisor e	mail:							
Study abroad program advisor signature (typed signatures are acceptable):  Da									
SECTION B: TO BE COM	IPLETED E	BY STUDI	ENT						
List the number of cred	it hours o	f the pro	ogram:						
AFFIRMATION OF FINA	ANCIAL F	AID FUN	D USE						
I understand that I meals) and will use						e host institutior	n (including tuition,	fees, housing, and/or	
I understand that a of my transcript by					ion must be	resolved in suffic	cient time to allow t	he receipt and review	
I understand that I certify that I am att							nstructor(s) and/or	host institution	
I understand that n assistance.	ny failure	to do th	is will res	ult in the los	s of all feder	al and OFA-admi	inistered institution	al financial	
I understand that if transfer credit hou							adjusted based on t oad.	he number of	
Student Signature (typed signatures are acceptable)							Date		

More information can be found on our website: finaid.umich.edu/abroad. If you have questions regarding this form or about receiving financial aid for studying abroad, contact the financial aid study abroad team at finaid.abroad@umich.edu.

Page 1 of 2 REV: 06/24/2025 o://InDesign/A&E



Student signature (typed signatures are acceptable)

## FINANCIAL AID STATEMENTS OF UNDERSTANDING

Please initial each line and sign below to certify that you have read and understand these statements:

\_\_\_\_\_\_\_ I understand that my financial aid will not be increased for unanticipated or emergency expenses as it relates to my study abroad travel. This includes but is not limited to living costs associated with being in-country longer than intended for any reason including illness, travel restrictions, or high cost flights/repatriation flights to the student's home country.

\_\_\_\_\_\_\_ I understand that I must submit and adhere to any safety plans required by the University of Michigan in order for my request for financial aid to be processed.

\_\_\_\_\_\_\_ I understand that should there be a disruption in my enrollment, I am required to finish the program remotely or financial aid will be revoked or reduced.

\_\_\_\_\_\_ I understand that university travel guidelines are subject to change and agree to adhere to any updated requirements as it pertains to my study abroad program.

Date

Page 2 of 2 REV: 06/24/2025 o:/llnDesign/A&E

U-M ID (eight digits)