If you will study abroad in a U-M program for the 2019 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. 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.

Students in non–UM study abroad programs must visit our office and complete a Consortium Agreement. Do not complete this form.

Student Name ________________________________________________________
UMID (8 digits) __________________

Program (check one):  
☐ CGIS  ☐ IPE  ☐ Art & Design  ☐ GCC*  ☐ GIEU*  ☐ Ross Global Initiative  
☐ Other ____________________________________________________________

Section A: To be completed by Study Abroad Program Advisor

Study Abroad Program Name ___________________________________________  Location __________________
Program Dates: Start ____________________  End ____________________  Credit Hours ____________
☐ U-M Tuition Charged  
☐ No U-M Tuition

Print Study Abroad Program Advisor Name  (This is not your academic advisor) ______________________________________
Study Abroad Program Advisor Email __________________________________________
Study Abroad Program Advisor Signature _____________________________________  Date ________________

Section B: To be completed by Student  (Initial each section and sign below)

Do you have a passport?  ☐ Yes  ☐ No

AFFIRMATION OF FINANCIAL AID FUND USE

☐ I agree to use all financial aid resources received from the University of Michigan to pay any costs charged by the host institution (may include tuition, fees, room and/or board).

☐ I understand that any existing balance at the host institution must be resolved in sufficient time to allow the receipt and review of my transcript by the 90th day after the program ends.

Note: If your transcripts will not arrive at U-M within the 90-day window, we will require a letter from your advisor or host institution stating that you have attended all classes and enrolled as a full-time student.

☐ I understand that my failure to do this will result in the loss of all federal and OFA-administered institutional financial assistance.

☐ I understand that if I don’t transfer a full-time credit load back to U-M, my aid may be adjusted based on the number of transfer credit hours received.

STUDENT SIGNATURE ________________________________________  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 our staff at 734-763-6600 or finaid.abroad@umich.edu.

*Note: Students enrolled in these programs will have received full grant eligibility in the Winter aid package. Additional aid will be loan only (or scholarship from program, if applicable).