2011 – 2012 Intent to Register Form

This form is NOT a binding document. It is used to determine financial aid over the coming academic year.

We received your 2011-2012 FAFSA Form. Your financial aid will be based on the amount of credit hours you will be taking throughout your academic year. Please complete this form so that a Financial Aid package can be mailed to you. Remember most classes are 3 credit hours.

NAME ___________________________ PHONE NUMBER ___________________________

Please circle your answer and only circle one answer per question.

FALL 11 (August 19 - December 15): 3 hrs  6 hrs  9 hrs  12 hrs  15 hrs _____ (other hours)  or  I will not enroll this semester.
(Please select the total number of hours you plan to take for Session A and B combined.)

SPRING 12 (January 6 - April 26): 3 hrs  6 hrs  9 hrs  12 hrs  15 hrs _____ (other hours)  or  I will not enroll this semester.
(Please select the total number of hours you plan to take for Session A and B combined.)

SUMMER 12 (April 27 - August 16): 3 hrs  6 hrs  9 hrs  12 hrs  15 hrs _____ (other hours)  or  I will not enroll this semester.
(Please select the total number of hours you plan to take for Session A and B combined.)

Please answer the following questions regarding the aid you wish to receive & the items you want to have covered by the aid:

- Interested in student loans?  
  Yes   No

- Interested in getting books covered?  
  Yes   No  (You would need to say yes to loans for this to be an option).

- Have aid cover the $135 New Student Registration Fee (one time fee for first semester only)?  
  Yes   No

- Will you be graduating this school year?  
  Yes   No
  If yes, do you want to have the $125 Graduation Fee cover by financial aid?  
  Yes   No
  If yes, please list the semester you will graduate ___________________________

- Tuition Assistance from employer?  
  Yes   No  If yes, please provide paperwork and list amount ___________________________

- Outside Scholarships?  
  Yes   No  If yes, please provide the name and amount ___________________________
  (Examples include MI Works, MET, TIP and TEACH). Please send the letter from Organization stating amount you will receive).

- Will you have any fees for your classes such as Online or computer courses (Fees are $30 per class)?  
  Yes   No
  If yes, please estimate your fees per semester so your aid can cover these fees. Fall $_____  Spring $_____  Summer $_____ 

Additional information I need to make the Student Financial Services Office aware of:

__________________________________________________________________________________________________

Your financial aid is an estimate until you register. If anything changes please contact the Student Financial Services Office as soon as you are know your plans are changing. Please complete this form and return it to the Student Financial Services Office by email, fax or mail.

Sincerely,

Lori A. Smith
Student Financial Advisor
248-218-2029
248-218-2065 (fax #)
Lsmith2@rc.edu

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