



**INSTITUTIONAL DREXEL ELEARNING FINANCIAL AID APPLICATION
FOR U.S. CITIZENS AND PERMANENT RESIDENTS
2006–2007 ACADEMIC YEAR**

Information provided on this form will enable the Financial Aid Office to correctly process your financial aid application. To be considered for federal aid, you must also complete the Free Application for Financial Student Aid (FAFSA), available at www.fafsa.ed.gov.

Please complete, sign, and return to: Financial Aid Office
Drexel University
3141 Chestnut Street
Philadelphia, PA 19104–2876
OR fax to 215-895-1692

Personal Information

Student Name: _____ University ID#: _____

Daytime Telephone Number: _____ Email Address: _____

Program Information

College: _____ Major: _____ Degree Option: Bachelor's Master's

Expected date of graduation from Drexel degree program: Month _____ Year _____

Credit Hours: *Indicate the number of credits you plan to take each term. To be a full-time student you must be enrolled for at least 12 credits (undergraduate students) or 9 credits (graduate students). To be eligible for federal loan funds, you must be enrolled at least half-time. Students enrolled less than half-time are not eligible for federal funds.*

Quarter Program Students

- Fall Quarter 2006–2007 (9/25/06–12/16/06)
- Winter Quarter 2006–2007 (1/8/07–3/24/07)
- Spring Quarter 2006–2007 (4/2/07–6/15/07)
- Summer Quarter 2006–2007 (6/25/07–9/8/07)

Semester Program Students

- Fall Semester 2006–2007 (8/28/06–12/15/06)
- Spring Semester 2006–2007 (1/8/07–5/4/07)
- Summer Semester 2006–2007 (5/14/07–8/3/07)

Other types of financial aid: *If you are receiving, or expect to receive, any of the following awards for the 2006–2007 academic year, please indicate the expected amount.*

Expected Amount Per Term

Drexel eLearning Partner Discount _____

Tuition Scholarship _____

Drexel Employee Remission _____

Non-Drexel Employee Remission _____

Other _____

I certify that the information I am providing is accurate, and I understand that if I register for fewer credits than indicated, my financial aid eligibility may be adjusted.

Student Signature: _____ Date: _____