

INTENT TO ENROLL CONFIRMATION

Date:					
First Name:_					
Last Name:_					
Student I.D.	(W#):				
City, State, 2	Zip:				
term. Our re	cords also show that	ived information that you have you are pre-registered for or your intent to stay enrolled in	ne or more clas	ses that have no	t started for this term. The
FEDERAL V	VITHDRAW REGULA	ATIONS FOR LESS-THAN-F	ULL-TERM CL	ASSES	
in any classe	es that have not starte	re calculate how much of you ed yet. However, if you retur nancial aid for the current ter	n this "Intent to		
WHAT DO I	HAVE TO DO?				
	d return this form to to rted yet for this term.	the Financial Aid Office confi	rming that you i	intend to stay en	rolled in any classes that
INTENT TO	ENROLL CONFIRM	ATION			
Mark the box for the curre		confirmation statement confi	rming you inten	d to stay enrolled	d in the courses listed below
☐ I cor	firm that I intend to s	tay enrolled and complete th	e courses listed	d below for (xx) to	erm.
Term	Course #	Course Title		# of Credits	Course Start Date
		L			
Signature: _			Date:		
Please conta	act our office if you ba	ave any questions: Phone (8)	11) 5626 <u>-</u> 7560·	Fav: (801) 626-7	7408

Email: finaid@weber.edu.