

Enrollment Status Change Form

In order to avoid delays in processing your financial aid, we are asking that you please verify for our office the number of credits you intend to take for the fall and spring semesters. Please use the space provided below and return this form to:

Financial Aid Office
Frostburg State University
101 Braddock Road
Frostburg, MD. 21532
fsufinaid@frostburg.edu
FAX: (301) 687-7074

Name: _____

FSU ID: _____

Number of Enrolled Credits for

Fall 2019:

Spring 2020:

My signature below indicates that I understand that it is my responsibility to notify the Financial Aid Office if my enrollment plans change after completing and submitting this form to them. I also understand that changing my enrollment status may cause my financial aid to be adjusted.

Student Signature: _____

If you have any questions or concerns, feel free to contact our office by calling (301) 687-4301.