

SUMMER ATHLETIC AID ACCEPTANCE FORM

Summer School Aid Information:

Name: _____ Sport: _____

Approved for _____ credit hours (check all that apply)

Tuition and Fees Only _____ Books _____ Room _____ Board _____

Percentage Amount Approved _____ %

4 week 6 week I 6 week II 8 week 12 week

Denied Reason: _____

Student Section:

By signing this form, you have been informed about the status of your athletic aid application request. Per the Summer School Aid Policy, if you fail or withdraw from a course already in progress you may be billed the cost of tuition for that course. Refer to tuition and fees table for more details

<https://registrar.uiowa.edu/tuition-fees>

If you change your schedule after signing this form without submitting a Summer School Addendum form and receiving approval for your changes, you will be held financially responsible. If your aid is not approved and you are enrolled in summer courses, you will be held financially responsible for such charges.

As of today's date _____, I have been informed by my Academic Coordinator of my summer athletic aid award status. By signing below, I agree to the terms and conditions stated above.

Signature _____ Date: _____