



UNIVERSITY OF NOTRE DAME

OFFICE OF STUDENT FINANCIAL SERVICES FINANCIAL AID

SUMMER COST OF ATTENDANCE WORKSHEET

HOME INSTITUTION:

University of Notre Dame Phone: (574) 631-6436
Office of Financial Aid Email: finaid@nd.edu
115 Main Building
Notre Dame, IN 46556

HOST INSTITUTION:

School: Phone:
Office: Email:
Address:

AND

The University of Notre Dame and the host institution named above are herein entering into an agreement for the purpose of disbursing private student loans to University of Notre Dame student named below, attending the host institution as a guest student for the summer session:

Student's Name
Address

Date of Birth
Phone

The individual authorized to sign below on behalf of the University of Notre Dame does hereby agree to the following:

- 1. The University of Notre Dame is the parent institution financial aid matters and will confer a degree upon successful completion of the student's program.
2. Eligible private student loans will be disbursed directly to the student's account at Notre Dame. The loan proceeds will then be forwarded to the Host Institution.
3. The University of Notre Dame will serve as a transfer agent for all student aid funds and will refund/return funds as necessary based on changes in enrollment status.

The individual authorized to sign below on behalf of the Host Institution does hereby agree to the following:

- 1. The Host Institution will verify enrollment status and notify the University of Notre Dame of any changes in enrollment status.
2. The Host Institution confirms the following:

COST OF ATTENDANCE

Table with 2 columns: Item, Amount. Rows include Program Fee (Tuition), Room (Accommodation), Board (Meals), Books and Supplies, Transportation, Other (specify), and TOTAL.

ENROLLMENT STATUS

Form with fields for Full-time, Half-time, Less than half-time, Number of Credits, Academic Calendar (Semester, Quarter), Program enrollment dates, and Institutional Aid.

SIGNATURES:

On behalf of the University of Notre Dame:

Financial Aid Officer Printed Name and Title Date

On behalf of the Host Institution:

Financial Aid Officer Printed Name and Title Date

This form must be on file with the Office of Financial Aid at the University of Notre Dame before any private student loans may be certified or disbursed.

Please submit signed and completed form, along with supporting documentation, to the Office of Financial Aid. Contact information provided below for email (preferred method) and mail.

University of Notre Dame | Office of Financial Aid | 115 Main Building | Notre Dame, IN 46556
Email: faforms@nd.edu | Phone: (574) 631-6436 | Website: financialaid.nd.edu