

W&M FINANCIAL AID

2025 Graduate Summer School Financial Aid Application

Name: _____

Student ID #: _____

You must be enrolled at least half time to be eligible for Graduate financial aid consideration.

Graduate Programs		<i>You must be enrolled at least half-time.</i>	
<input type="checkbox"/> Arts & Sciences	<input type="checkbox"/> School of Business	<input type="checkbox"/> Flex MBA	
<input type="checkbox"/> Law	<input type="checkbox"/> VIMS	<input type="checkbox"/> School of Education	
Session S1 (May 27 – June 27)	_____ # Credit Hrs	Session S8 (June 30 – Aug 14)	_____ # Credit Hrs
Session S2 (June 30 - Aug 1)	_____ # Credit Hrs	Grad. Ed Non Std (May 27 - Aug 1)	_____ # Credit Hrs
Session S3 (May 27 - Aug 1)	_____ # Credit Hrs	Law Non Std (May 27 - Aug 1)	_____ # Credit Hrs
Session S7 (June 19 – June 26)	_____ # Credit Hrs	Flex MBA Non Std (May 19 – Aug 14)	_____ # Credit Hrs

If **NONE** of the sessions in the section (above) corresponds to the start and end of your summer courses, contact your financial aid counselor for further guidance.

If your aid exceeds summer charges, the Bursar's Office will mail your refund check to your local address listed in Banner, unless you have signed up for the direct deposit option. Please contact the Bursar's Office at 757-221-1220 or bursar@wm.edu for refund information.

Select All Applicable Options Below

- ☐ I have filed the 2024 - 2025 FAFSA (Free Application for Federal Student Aid).
- ☐ I will be applying for a private loan.
- ☐ I am studying abroad and attending summer school at W&M (**Consortium Agreement is required**).
- ☐ I will register for at least **three (3)** credit hours for the summer session(s). I understand that if my enrollment hours change, I will notify the financial aid office promptly.

Changes in enrollment after your aid eligibility is determined may affect your financial aid eligibility. By signing below, you agree to notify the Financial Aid Office as soon as you change your summer registration. If you make any schedule changes that require a revision to your student loan eligibility, you are responsible for any balance owed on your student account.

Signature: _____

Date: _____

*Signatures must be handwritten. Typed computer fonts are not acceptable

- ☐ This is a revised summer aid application - updating the information/application I have previously provided.

Use one of the following methods to return this form		To protect your data, we do not accept documents via e-mail attachment	
Online Upload (preferred)		https://www.wm.edu/financialaid/box	
Fax		757-221-2515	
Mail	Office of Student Financial Aid William & Mary P.O. Box 8795 Williamsburg, VA 23187-8795	Office of Student Financial Aid William & Mary Blow Memorial Hall, Room 124 262 Richmond Road Williamsburg, VA 23185	