

**FINANCIAL AID INSTRUCTIONS  
SUMMER 2016**

For course work that begins and ends anytime between  
**April 2016 and August 2016**

UNC considers students who are registered for a period that begins and ends in **May, June or July** to be enrolled in a **Summer** term, and the School of Medicine must comply with the university's definitions and procedures. Students in the clerkship and elective years will pay tuition and fees for Summer Session I and/or Summer Session II. Students enrolled in a Summer Review will pay tuition and fees for the term of remediation. Students who are registered in a Summer session must pay tuition and fees; you cannot advance to the Fall term if you owe tuition and fees for Summer.

Financial aid is available for the period(s) of enrollment by application only.  
FINANCIAL AID AWARDING IS NEVER "AUTOMATIC"--you must apply.

If you received financial aid from the School of Medicine for the 2015-16 academic year, the data from Free Application for Federal Student Aid (FAFSA) on file will be used to support the Summer aid application. **NO AID FOR ANY PERIOD THAT BEGINS AND ENDS BETWEEN APRIL 2016 AND AUGUST 2016 CAN BE PROCESSED WITHOUT A SUMMER APPLICATION.**

**AWARD NOTIFICATION:** Students who complete an application for Summer aid will be notified of the award via email to view your award on ConnectCarolina. If any changes are to be made please do so on the ConnectCarolina site. A delay or error in completing will delay the delivery of funds.

Be sure the Office of Student Affairs has your correct summer address and phone number at all times.

**AID DISBURSEMENT:** Aid of every type is disbursed by the Office of Student Accounts and University Receivables in the SASB Building beginning on the first day of enrollment. **By federal regulations, Stafford Loan checks must be disbursed in two payments: the beginning of the term and the "midpoint."** Students enrolled in both Summer Session I and Summer II will have the first disbursement at the end of April and another in June. Borrowers enrolled in Summer I only will have disbursements at the beginning of June and the middle of June. Loan recipients enrolled in Summer II only will have two disbursements, the end of June and mid July (exact dates will be published when they are known). Please plan accordingly.

**THOSE APPLICANTS WHO DID NOT RECEIVE FINANCIAL AID IN 2015-16 MUST COMPLETE:**

- **THE 2015-16 FAFSA** please complete an application online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). Our school code is 002974.

Please return the applications and materials to:

The UNC School of Medicine  
Financial Aid Office  
CB# 9535, 1001 Bondurant Hall  
Chapel Hill, NC 27599-9535  
Phone: 962-6118

**Original Signature Required: No Faxes**

**APPLICATION FOR FINANCIAL AID  
SUMMER 2016**

To the applicant: This application is for medical students who will be officially enrolled at the School of Medicine in Summer Session I and/or Summer Session II. Please refer to the instructions.

**Please type or print with black ink**

**LEAVE NO BLANKS. Use "O" or n/a, as appropriate. Incomplete forms will not be processed and will be returned, causing loss of priority status.**

NAME \_\_\_\_\_ PID# \_\_\_\_\_  
print clearly

SUMMER ADDRESS \_\_\_\_\_ PH. \_\_\_\_\_  
This is for quick reference only and will not update your address with Student Affairs. Please report any changes to reception staff in 1001 Bondurant Hall

I will be registered for (check all that apply):

*Summer Session I*

Second year Summer Review \_\_\_\_\_  
beginning date \_\_\_\_\_ ending date \_\_\_\_\_

*Summer Session II*

First year Summer Review \_\_\_\_\_  
beginning date \_\_\_\_\_ ending date \_\_\_\_\_

**Block 0 – June only enrollment** \_\_\_\_\_

OTHER REGISTRATION (type of registration) \_\_\_\_\_ beginning date \_\_\_\_\_ ending date \_\_\_\_\_  
(For example: School of Public Health, Honduran Health Alliance, Summer Research)

Did you apply for aid at the School of Medicine for the 2015-16 academic year? YES \_\_\_\_\_ NO \_\_\_\_\_ *see the reverse side*

Will you be residing with your parents in the Summer of 2016? YES \_\_\_\_\_ NO \_\_\_\_\_

RESOURCES: List all resources you will have for the term(s) of enrollment. **LEAVE NO BLANKS, use "0" or n/a, as needed.**

Your earnings (before taxes)

Campus employment (not Work-Study)	\$ _____	Vocational Rehabilitation Benefits	\$ _____
Off-Campus Work	_____	Other Benefits (type _____)	_____
Graduate Assistantship	_____	Other Resources (itemize)	_____
Graduate Fellowship	_____	_____	_____
G.I. Bill Benefits	_____	_____	_____

EXTRAORDINARY EXPENSES (optional): If you have expenses unique to your Summer studies that are not included in the standard budget allowances, you may itemize those expenses here to request additional aid. Aid can be adjusted to include special travel costs (i.e., study abroad or at an away site), child care, etc. Please explain each item, giving monthly costs in U.S. dollar amounts. Attach copies of pertinent documentation (statements, receipts). Use an additional "8 1/2 x 11" page, if necessary.

\_\_\_\_\_ Did you receive financial aid for this in 2015-16 year? \_\_\_\_\_

I certify that the information provided on this form is complete and correct to the best of my knowledge. I will notify the Student Aid Section: in the event that: I am given assistance from a different source; any of the reported information changes; my registration changes after my award is made. I know funds will not be disbursed if I am registered for fewer hours than those on which my aid is based. If I reduce hours or withdraw after receiving aid, I will repay all or a part of the amount received, as required.

I understand that I must be a student in good standing and making progress toward completion of a degree in order to receive funds.

\_\_\_\_\_  
Signature Date  
ORIGINAL SIGNATURE REQUIRED--USE INK--NO FAXES ACCEPTED