School of Theology and Ministry
Seattle University • 901 12th Avenue, PO Box 222000 • Seattle, Washington 98122-1090 • (206) 296-5330

DECLARATION OF CREDITS FORM

(For STM Financial Aid purposes only)

DUE DATE: April 1, 2012

This form needs to be completed and turned in (along with your Criteria Based Aid Application) for you to receive any STM financial aid. If you do not file this form in a timely fashion, due date April 1st (July 1st for students NEWLY ADMITTED in the fall), you risk being denied financial aid. Make a copy of this sheet for your personal records.

Please indicate below the number of credits for which you are planning to register. Be accurate. If you change credits up or down, you may deny other students aid. If you have a serious reason or need to change credits, please notify the department in writing. If you are not registered by the last day to register add/drop (as designated each quarter by Seattle University), financial aid designated for that respective quarter will be withdrawn.

Please note: Educational Doctoral students are not eligible for STM tuition remission or STM tuition rate. Transitional and Non-Matriculated students are not eligible for STM tuition remission. Catholic secondary and primary school teachers, even if non-matriculated, may be eligible for tuition remission.

_____ _____
Print Name *Program*

QUARTER

Summer 2012 _____ credits

Fall 2012 _____ credits

Winter 2013 _____ credits

Spring 2013 _____ credits

For Office Use Only:

Dec. of Credits rcv'd. _____

Returned for correction or completion_____

Course Projection rcv'd. _____

1. Are you taking CPE during any of the quarters listed above? If yes, indicate which quarters: _____
2. Do you receive tuition remission from any other institution or your employer? ☐ Yes ☐ No
3. Are you receiving SU educational assistance because you are a SU employee? ☐ Yes ☐ No
4. Name of Employer/Occupation _____
   This information is used to help STM with scholarship designation.

I acknowledge all information on this form is accurate and complete.

_____
Signature *Date*

_____
Student Identification Number