Financial Aid Office

800 West Main Street Whitewater, WI 53190 www.uww.edu/financialaid p 262-472-1130 f 262-472-5655 uwwfao@uww.edu

Student ID#: _____

2023-2024 Confirmation of Enrollment in Future Modules

Student Name:			Student ID#:	
	Last	First	MI	
term. Even the Education to be in writing,	hough you are verify your in using this for ete this form	e registered for classes that statement to attend additional classes, or by emailing uwwfao@u	art later in the term es in a future session ww.edu. emainder of the te	class in the current module of the current n, we are required by the U.S. Department of on of the current term. This verification must rm and return it to our office within 14 days.
This form is fo	or the followi	ng term:		
☐ Fall 2023 ☐ Winterim ☐ Spring 202 ☐ Summer 2	24			
I plan to atter	nd additional	classes in future modules of tl	ne term checked at	pove.
-		ling additional classes in future attend here:	e sessions of the te 	rm checked above. Please indicate the
□ No , I do not plan on attending additional classes in future sessions of the term check above. I understand that because I have withdrawn and do not plan on attending classes in future sessions of the term checked above, that the Financial Aid Office will adjust my aid according to the federal Return of Title IV Funds guidelines. I further understand that this may result in my owing funds back to UW-Whitewater.				
false or misle	eading inform	ation on this worksheet, you	may be fined, sente	s complete and correct. If you purposely give enced to jail, or both. Note: We may request ation on this form is inaccurate.
Student Signa	ature			te