JMU
Office of Financial Aid and Scholarships

Enrollment Verification Form
Office of Financial Aid & Scholarships
738 S. Mason Street
MSC 3519

The Office of Financial Aid & Scholarships at James Madison University requires verification of enrollment for each consortium participant before disbursing financial aid. In order to be processed, this form **must** be completed and signed by the student **and** a representative from the host institution. This form **must** be submitted by the host institution **after** the student has begun classes, as it verifies the student began enrollment in all the classes listed below.

Student Name: _____

Student JMU ID Number: _____

STUDENT SECTION

I understand that in order for financial aid to be disbursed, the courses outlined below MUST match the courses previously approved on the JMU *Transfer Credit Approval* form associated with this term of study. If the schedule of courses does not match, then I must either get a new transfer credit form approved at JMU to match the registration on this Enrollment Verification form, or I must change my enrollment at the host school to match the courses outlined on the approved transfer credit form and submit a new Enrollment Verification form with those courses. Furthermore, I understand any changes to my schedule after this form is submitted can result in a change in financial aid eligibility, up to and including after the courses are transferred back to JMU at the conclusion of my term of study. Changes in financial aid eligibility can result in cancellations or reductions to previously disbursed awards and a balance owed on my JMU account.

_____   _____
Student Signature   Date

_____
Printed Name

HOST INSTITUTION SECTION

Your signature on this document verifies that the student listed above is studying in a program administered by the host institution and taking the courses indicated below:

Host Institution: _____

Program of Study: _____

Course Number	Course Name	Credit Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____   _____
Host Institution Representative Signature   Date

_____   _____
Printed Name   Title

_____
Institution

The host institution may either email a scanned copy of this completed document to FinAid-Grants@jmu.edu or fax it to the Office of Financial Aid and Scholarships at (540) 568-7994. Questions? Please email FinAid-Grants@jmu.edu or call (540) 568-7918.