



Financial Aid Office
 Aber Hall 5th Floor
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 Fax: (406) 243-4930
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Extended Term Agreement with Financial Aid

Use this agreement for courses listed in the Extended Terms. Examples include UM Extended Credit courses offered with partner organizations (e.g. Aerie Backcountry Medicine, Wild Rockies Institute, Families First, etc.) and select study abroad programs. This form notifies Financial Aid of the non-standard tuition costs, includes these credits in your semester credit load for full or part time status, and may adjust your aid package.

Complete the following information, obtain your dean or department chair's signature, then return to the Financial Aid Office. Agreements are evaluated by and final decisions made at the discretion of the Financial Aid Director.

Student Name: _____

Student ID #: _____

Email: _____

Phone #: _____

1. Extended Term in which courses will be taken (circle one): *SPRING / SUMMER / AUTUMN* of 20_____
2. Number of credits enrolled for the above term: _____
3. Total cost of Extended Term courses: \$_____
4. List the course specifics of credits enrolled:

<u>COURSE #</u>	<u>COURSE NAME</u>	<u># CREDITS</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

By signing below, I certify that the above-named student has been approved for course work at the Host School and that the credits will be accepted towards the student's degree at the University of Montana.

UM Dean or Dept. Chair Signature Printed Name & Title Phone # Date

I, the undersigned, understand:

- Courses taken in an Extended Term are not state funded, do not apply toward the tuition flat spot, and tuition waivers do not apply.
- I must be admitted to a degree seeking program to receive federal aid.
- I am taking courses in an Extended Term that will apply toward my degree at the University of Montana.
- I need to be registered for 6 or more total credits to receive federal aid.

Student Signature

Date