

Office of the Bursar
8550 Magellan Parkway, Ste. 1100
Richmond, VA 23227
P: (804) 627-5362
F: (804) 627-5441
Email: bsr-bursar@bshsi.org



Intent to Enroll for Summer Courses

Name: _____ Student ID _____

Telephone: _____ Email: _____

If you intend to enroll for 6 or more credits for the upcoming Summer Semester and would like to have your eligibility for Financial Aid reviewed you must complete this form.

*Federal loans require at least half-time enrollment (at least 6 credits).

*Private loan options are available at www.elmselect.com

Return this completed form to the Office of Financial Aid and allow up-to 14 business days for processing.

In person: Rooms 221, 225, and 223 at the College

Email: bsr-confinancial@bshsi.org

Faxed: 804-627-5441

All forms should be returned to the OFA no later than 05/01/18.

Enrollment SUMMER 2018 Semester:

J Sargent Reynolds: _____ credits.

On Campus CON: _____ credits.

Expected Graduation Date:

_____ **DO NOT LEAVE BLANK**