

Financial Aid Form -

CSULB ID Number

to the CSULB Office of Financial Aid and Scholarships. Failure to
play in the awarding and/or disbursement of your financial aid.

Check all that apply): Fall 2024 Spring 2025 Full Year

Fall Semester End Date (MM/DD/YYYY)

Spring Semester End Date (MM/DD/YYYY)

Advisor Name (print)

Signature

Date

Section 2: Student Agreement

Initial next to each statement below indicating you have read and understand each of the statements.

Financial Aid Agreement	Initials
I understand that I will not be awarded financial aid until all items on my Financial Aid To Do List have been completed, and I have submitted this form to the CSULB Office of Financial Aid and Scholarships.	
I understand that my financial aid funds cannot be released until the start of my program. If my program starts earlier than the CSULB semester, my aid will be released based on the CSULB semester start date.	
I understand that I am responsible for making any payments to the host program. I will receive my financial aid disbursement as a refund. CSULB will not send refunds to anyone other than the student -- or in the case of a Parent PLUS Loan -- to the borrowing parent.	

Return this form and any attachments to our office labeled with your name and CSULB ID Number:

By Mail:

Office of Financial Aid and Scholarships

In Person:

Visit our website to