



Summer 2026 Financial Aid Application

Students accepted into a degree program at Washington University as of the summer of 2026 semester may complete this application in order to take advantage of available Federal student loan or grant eligibility for coursework at Washington University. No institutional funding is available for summer through the SFS Office.

Session Dates:

First session begins on May 18 and ends June 5.

Second session begins on June 8 and ends July 10.

Third session begins on June 8 and ends July 31.

Fourth session begins on July 13 and ends August 13.

Basic Requirements:

- ✓ **Have a current Free Application for Federal Student Aid (FAFSA)** on file in Student Financial Services. Undergraduate students: 2025-2026 FAFSA, Graduate students: 2026-2027 FAFSA
- ✓ **Remain enrolled** for the number of credit hours indicated on this application. If at any time during your session you are enrolled in fewer hours than you indicated, your financial assistance will be reconsidered.

You will be notified by email when your financial aid decision is available, usually within 2 weeks of your submission of the Summer Financial Aid Application.

APPLICANT INFORMATION:

Name: _____ Student ID: _____

Session	Course Name	Course #	Credit Hrs.	Tuition Charges
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	\$ _____

_____ I will be living either on campus or off-campus with a rent expense

_____ I will be living at home with no expense for housing

PLEASE NOTE: CLASSES LISTED BUT NOT TAKEN MAY RESULT IN A DECREASE OF YOUR FINANCIAL AID AWARD

If you are planning on taking classes at another institution ("Host School") and plan to receive aid through Washington University, please continue on to the second page.

VERIFICATION OF INFORMATION:

By signing this form, I verify that I am meeting satisfactory academic progress requirements as determined by my division's standards and that I am eligible to enroll in the course(s) listed. I understand that my financial aid may be adjusted if changes in my student status occur, (i.e. change in enrollment). By signing this, I certify that the information reported to qualify for federal aid is correct and complete and I will provide all requested documents, if necessary.

Student Signature: _____ Date: _____

Please return completed form to financial@wustl.edu or to the address listed below.



Summer 2026 Consortium Agreement

Student Name: _____ Student ID: _____

Consortium Agreement between Office of Financial Aid, _____ (Host School), and the Office of Student Financial Services, Washington University in St. Louis (Home School).

The two institutions named above are herein entering into a consortium agreement for the above-mentioned student in the Summer 2026 term.

CERTIFICATION

Washington University Student Financial Services:

1. Washington University agrees to provide payment to the above-mentioned student, if eligible, under Title IV grant and loan programs, as appropriate for term(s) specified above.
2. The above-mentioned student is enrolled in a degree program at Washington University and is making satisfactory progress.

Please print or type name and title:

Name: Shelby Flood Title: Coordinator

Signature: _____ Date: _____

The below host course information is to be completed by the student's Academic Advisor:

Start Date	Host Course Name/Number	Credit Hours	WashU Course Equivalent	Credit Hours

This student has been given permission to enroll in the courses above, which have been evaluated for transfer and are required for the student's degree program.

Please print or type name and department:

Name and Department: _____ Date: _____

Signature: _____

Please give the bottom portion of this form to the Financial Aid Office at your host school to complete and return.

Host Financial Aid Office:

1. The Host School agrees not to provide payments of the Federal grant and loan programs to the above-mentioned student during the term(s) specified.
2. The Host School agrees to provide an estimated budget of tuition and expenses, the student's period of enrollment, and the number of credit hours in which the student will be enrolled (please attach).

Please print or type name and title:

Name: _____ Title: _____

Signature: _____ Date: _____

Please return the completed form and estimated budget to the Office of Student Financial Services by email at **Financial@wustl.edu** or by mail at the address listed below.