Financial Aid Office

1032 West Sheridan Road Sullivan Center Room 190 Chicago, Illinois 60660

Chicago, Illinois 60660
Phone: 773.508.7704
Scan completed form and upload to https://forms.luc.edu/faoupload



Preparing people to lead extraordinary lives

2022-	2023	Enrol	lment \	Verifi	ration
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Student Name: (Please print)	Loyola ID: (Your 11-digit Loyola ID number begins 0000)
Please complete the following to indicate your c	current or projected enrollment.
	aid Office to make all appropriate changes to your financial aid award. Idenstand that your award may be adjusted based on this change in
I certify that I am/will be enrolled incr	redit hours for Fall 2022
I certify that I am/will be enrolled inc	credit hours for Winter 2022 (Graduate Business students only)
I certify that I am/will be enrolled inc	
I certify that I am/will be enrolled in	credit hours for Summer 2023
best of my knowledge. If requested, I agree	by other person on this form is accurate and complete to the to give proof of the information I have provided on this rmation will result in the loss of financial aid eligibility.
Student Signature*	Date
*Typed and digital signatures are not acceptable	

EZ 2023