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## 2025-2026 GVSU/NCMC Concurrent Enrollment Form

By completing this concurrent enrollment form, students enrolled at Grand Valley State University and North Central Michigan College may receive financial aid based on the total number of credits enrolled at both GVSU and NCMC. This form is only to be used if you are receiving financial aid at GVSU. Please note: if you are planning to enroll full-time at GVSU you do not need to complete this form. This application is due by the 100% tuition refund deadline at GVSU each semester. Late forms will not be processed.

Name:	GVSU Student	ID Number:	
Major:	NCMC Student ID Number:		
Preferred E-mail:	Phone Nu	mber:	
Step I: Concurrent Enrollment Policy			
Please initial that you have read, understand, and agree to the information listed below.			
I. I understand that my financial aid may be reevaluated based on my enrollment at GVSU and at NCMC. If my enrollment changes I will submit a new class schedule. You must be enrolled in at least one credit at GVSU.			
2. I understand that I may receive aid to repeat a previously passed course one additional time.			
3. I understand that credits are verified as of the 5th day of class at GVSU each semester. Financial aid is based on the combined credits as of that date.			
4. I understand that if I withdraw from any courses, my financial aid may be recalculated.			
5. I am responsible for paying the bill at NCMC. Financial aid will not be transferred or released early for students participating in the concurrent enrollment program.			
6. If I do not successfully pass my attempted credits at NCMC, I may not be eligible to participate in concurrent enrollment in the future.			
7. I am responsible for having my NCMC transcript sent to the GVSU Records Office after the semester at NCMC has ended. My credits earned at NCMC will not be transferred to GVSU until this is done.			
8. I understand that I am not eligible for Federal Work-Study funds (if applicable) if I am enrolled in fewer than 6 credits at GVSU.			
Step 2: Concurrent Enrollment Period			
(Choose <u>one</u> . A new form must be submitted <u>each</u> semester.)			
□ Fall (August-December)	□ Winter (January-May)	□ Spring/Summer (May-August)	

## Step 3: Please attach a copy of your course schedule and your tuition bill at NCMC.

If your schedule and bill are not included, this form will not be processed. If you have not registered for courses yet, please contact the GVSU Office of Financial Aid & Scholarships.

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## **Step 4: Required Signatures**

Missing documentation will delay processing.

As part of the concurrent enrollment process, you must meet with your academic advisor. Please bring this form to your meeting. This section must be completed by your academic advisor.

Please list the courses and their GVSU equivalency the student is enrolled in for this semester at NCMC:

NCMC Courses	GVSU Courses	
GVSU Advisor Signature		
I verify that the courses taken at the host institution will	apply towards the student's program of study at GVSU.	
Advisor's Name A	Advisor's E-mail Address	
Advisor's Signature	Date	
Student Signature		
my financial aid award. I understand my GVSU financial	enrollment and transcript information needed to process aid will not apply to my GVSU account until my enrollment any financial aid through North Central Michigan due.	
I have been admitted into a degree-seeking program at C verify that courses I am taking at NCMC are applicable t taken at NCMC do not apply towards my program of st declare GVSU as the home institution for purpos	o my program of study at GVSU. I understand that if classes udy my financial aid could be adjusted or cancelled. I	
Student Signature:	Date:	
Please submit your completed form and documentation to finaid@gvsu.edu, fax: 616-331-3180, mail or in-person. Be s		

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