

# Financial Aid Transfer Evaluation 2024-2025



NORTHERN ILLINOIS UNIVERSITY

**Financial Aid and Scholarship Office**

*Your Future. Our Focus.*

**Submit to:**

**Financial Aid and Scholarship Office**

**Swen Parson Hall 245**

**DeKalb, IL 60115**

In order to determine your loan eligibility at NIU, we are required to review your student aid history. As a result of our inquiry into the National Student Loan Database System (NSLDS), it appears that you will be attending another institution during the same academic year as you are planning to enroll at NIU. Based on this information, we are unable to determine the funding you have received and/or confirm your withdrawal. In order to ensure that you are awarded in compliance with federal regulations, we will need you to obtain the following information from your previous school.

Student Name:	Student NIU Z-ID:
SSN:	

**A Financial Aid Administrator at your previous school must complete the following section.**

Indicate the aid year and term(s) student is enrolled:		Official Last Date of Attendance:	
Aid year: 20____ Terms: ___ Fall ___ Spring ___ Summer			
Gross Loan Amounts Disbursed:	Subsidized Loan:	Unsubsidized Loan:	
Federal Pell Grant Disbursed:	SEOG Disbursed:		
Are there any additional disbursements scheduled:     ___ Yes     ___ No			
If yes, please indicate dollar amounts and fund sources:			
Institution:	Address:		
Contact Person:			
Phone:	E-mail:		

**School Certifying Official Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_