



CHANCELLOR UNIVERSITY
Your Opportunity University™

REQUEST FOR SUMMER 2010 FINANCIAL ASSISTANCE:

Student Name: _____

SSN: _____

Please indicate the NUMBER OF CREDIT HOURS you plan to take below:

Summer Term 2010

- Three (3) credit hours
- Six (6) credit hours
- Nine (9) credit hours
- Twelve (12) credit hours

Projected Graduation Date: _____

Student Signature: _____

Date: _____

**Return this form to: Chancellor University
Office of Financial Aid
3921 Chester Avenue
Cleveland, OH 44114
Fax: 216-361-9096**