Office of Financial Aid Study Abroad
Verification of Program Participation

Last Name	First Name	MI	MGA ID#

Instructions: Students applying for any type of scholarship and/or financial aid to attend a Study Abroad Program must have this form completed and signed by the Program's Director. The form should be submitted to the Office of Financial Aid upon completion.

Please complete the following:

Program Title:	
Dates of Trip:	_____/_____/_____ to _____/_____/_____
Total Credit Hours to be completed:	

Tuition & Fees:	$
Estimated Books & Supplies:	$
Transportation:	$
Room & Board:	$
Other:	$
Other:	$
Total:	$

_____ _____

Provost Fellow International Education Signature: Date:

_____ _____

Print Name of Provost Fellow for International Education: Date:

Please return this completed form to financialaid@mga.edu or, one of our Financial Aid Offices in Macon, Cochran, Dublin, Eastman, and Warner Robins, Georgia OR fax to (478) 471-2790 (Macon), 478-934-3019 (Cochran, Dublin, Eastman), or 478-929-6787 (Warner Robins). If you have questions, please contact us at 478-387-0580 or visit our website at www.mga.edu/financial-aid/index.php.