2021-22 Enrollment Worksheet
(for enrollment during Summer 2021, Fall 2021, and Spring 2022)

Student Information:

Student Name: ________________________________  Former (i.e. maiden): ________________________________

BW Student ID: ____________________________  Phone #: ____________________________  Email: ____________________________

Anticipated Graduation:  
(Month)  (Year)

Do you already have a bachelor’s degree?  □ Yes  □ No  □ N/A

Is that bachelor’s degree from BW?  □ Yes  □ No  □ N/A

Tuition Assistance:

□ Yes, I will receive tuition assistance from my employer.  □ No, I will not receive tuition assistance from my employer.

If yes, how much per semester?  
Summer 2021 $________  Fall 2021 $________  Spring 2022 $________

Do you qualify for a BW tuition discount from these employers?  □ Cleveland Clinic  □ Cleveland Browns  □ MetroHealth

Please Note: Your eligibility for financial aid is determined by your academic program, number of semesters of attendance, and the number and type of credits you take at BW.

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Fill in each section below.  Estimate credits if necessary.  List BW Credits ONLY.*

<table>
<thead>
<tr>
<th>Summer 2021 Credits</th>
<th>Fall 2021 Credits</th>
<th>Spring 2022 Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergrad Credits:</td>
<td>Undergrad DAY Credits:</td>
<td>Undergrad DAY Credits:</td>
</tr>
<tr>
<td>Graduate Credits:</td>
<td>Evening/Weekend Credits:</td>
<td>Evening/Weekend Credits:</td>
</tr>
<tr>
<td></td>
<td>Graduate Credits:</td>
<td>Graduate Credits:</td>
</tr>
</tbody>
</table>

OR

□ Not Enrolling Summer 2021  OR  □ Not Enrolling Fall 2021  OR  □ Not Enrolling Spring 2022

*ATTENTION CURRENT BW DEGREE-SEEKING STUDENTS: If you take classes at another institution and intend to transfer those credits to BW, you are considered a TRANSIENT student. Please refer to the transient student information here at www.bw.edu/finaid/forms.

□ I declare, understand, and acknowledge the following:

  a) all information presented on this document is factually correct and honestly presented;
  b) if my actual enrollment differs from what is declared on this document, my financial aid eligibility may change; and
  c) if my actual enrollment plans vary from what is declared on this document, I will notify the Financial Aid Office as soon as possible.

Type or sign name: ____________________________  Date: ____________________________