Wheaton College Student Financial Services Internship Form					Undergraduates	
• Yo	lible for aid in an internshou must be enrolled at leayou are a summer applic our advisor must complet	ast half-time (i.e ant, you must a	lso complete the sur		ncial aid application.	
Part I - To Be Completed By Student						
Last name		First name		MI	Student ID #	
Year	Term registered (circle on		of hours registered	Sp	Sponsoring department	
	Fall Spring Summer	Othe	Other hours			
Advisor's name						
Street Address during internship						
Street City State				Zip	Country	
Part II –	To Be Completed By	Advisor				
Note to the advisor: Because the student might be using federal funds, it is necessary that you confer with the student to be sure a reasonable budget is being submitted. Please list figures that will accurately reflect costs that will be incurred by the student for this internship.		Budget		FOR OFFICE USE ONLY		
		Tuition	\$			
		Room	\$			
		Board	\$			
		Books/Supplies	s \$			
Include only those costs related to the registered term(s) circled above in Part 1.		Transportation	\$			
		Personal	\$			
Number of Credit Hours		Other	\$			
		Total	\$	-		
		<u> </u>				
Signature of Advisor				Date		

Email to sfs@wheaton.edu, fax to 630-752-5413; or mail to Student Financial Services, Wheaton College, 501 College Ave., Wheaton, IL 60187