

CONCURRENT ENROLLMENT CERTIFICATION FORM
2020—2021

SELECT SCHOOL: _____ North Idaho College _____ College of Western Idaho
 _____ College of Eastern Idaho _____ College of Southern Idaho

Initial each item below indicating you have read and understand the statement:

_____ I understand my financial aid eligibility will be determined by the Financial Aid Office at the above selected school and I cannot receive federal financial aid through Lewis-Clark State College (LCSC) for the same term. If my federal financial aid exceeds my fees at the selected school, I may use any residual funds I receive to pay my fees at LCSC.

_____ I understand it is my responsibility to pay all charges owed to Lewis-Clark State College or have a signed payment plan on file with the LCSC Student Accounts Office by their fee payment deadline, which may differ from my selected school.

_____ I understand this form will serve as my authorization to allow the release of transcript and other educational record information to the above selected school.

NAME: _____ LCSC Student ID#: _____

ADDRESS: _____

PHONE: _____ LCMail: _____

CONCURRENT SEMESTER: _____ FALL 2020 _____ SPRING 2021 _____ SUMMER 2021

My signature certifies I am enrolled at Lewis-Clark State College and the above selected school for the same semester.

Signature Date