



UHCL ID _____

UHCL - Office of Financial Aid
Confirmation of Future Attendance – Summer 2025

According to our records, you have changed your enrollment status for the Summer 2025 term. You may be subject to a Return of Title IV Funds, which may create a balance on your account. You must provide written confirmation on the intended amount of credit hours for your summer session(s), beginning no later than 45 days after you changed your original enrollment. Please complete and read the following carefully.

Summer Session Start and End Dates

May Mini 05/12/2025 - 05/30/2025

5 Week Session 1 06/02/2025 – 07/05/2025

8 Week Session 06/02/2025 – 07/26/2025

4 Week Session 07/07/2025 - 08/02/2025

A. Student Information

Last Name

First Name

MI

UHCL ID

UHCL Email Address

Phone Number

B. Confirmation of Future Attendance

Complete the chart with course information that you will be attending during Summer 2025 term.

Course Description	Hours	Summer Session	Session Start Date
EXAMPLE: MKTG 3031	3	8 Week 1	June 02, 2025

Read and initial each statement below.

_____ I understand that I am receiving this letter to confirm enrollment for summer courses, due to a change in my enrollment.

_____ I am enrolled in and **will attend** the courses listed in the chart above.

_____ I understand that if I do not attend the courses listed above, I will be subject to Return of Title IV Funds and may owe a balance to the University of Houston - Clear Lake.

_____ I understand that if I change any courses listed above, I must notify the Office of Financial Aid immediately, and **prior** to the start of the courses listed above.

_____ I understand that this form must be submitted to the Office of Financial Aid no later than 2 business days after I stopped attending summer courses, and before the start of the courses listed above. If I miss this deadline, I may be subject to Return of Title IV Funds and may owe a balance to the University of Houston - Clear Lake.

C. Certification and Signatures

By signing this worksheet, I have read and understand the statements above and certify that all the information reported on this worksheet is complete and correct. I understand that the Office of Financial Aid reserves the right to request additional information as needed.

WARNING: If you purposefully give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student Signature

Date

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.