

Alternative Programs Form 2014-2015

ALTPRO1415

STUDE	NT INFORMATION					
Student Name				Banner ID +		
eligible fo condition	classified by the Registrar's Office as or federal financial aid. If you are pu nal graduate student, please have yo Student Financial Assistance.	rsuing a second B	achelor's degree or a teach	er certification/li	censure or are a	
SECON	ID BACHELOR'S DEGREE					
	re pursuing a second undergraduate deg ted in order to be eligible for financial ai	•	= :	_		
List typ	e of degree(s) previously earned an	d the date grante	d:	_ Date:		
List typ	e of degree that student is currently	seeking:				
The nu	mber of credit hours from all previo 	us degrees that w	vill count towards new/curr	r ent degree acco	rding to a DARS audit:	
Academi	c Advisor Signature	Date	Print Advisor Name	Advisor	Phone Number	
TEACH	IER CERTIFICATION/LICENSURE					
то ве со	OMPLETED BY AN ACADEMIC ADVISOR.					
1. 2. 3. 4.	List the program the student has a Attach the student's specific plan number. Are the courses in the attached pl What is the student's expected pr	of coursework by	academic semester. This pl	an must list each	course subject &	
Academi	c Advisor Signature	Date	Print Advisor Name	Advisor	Phone Number	
	ITIONAL GRADUATE STUDENT DMPLETED BY AN ACADEMIC ADVISOR.					
1. 2. 3.	2. The reason for the conditional status: (check one): Output Description Low GRE test scores Descriptio					
Academi	c Advisor Signature	Date	Print Advisor Name	Advisor	Phone Number	
CERTIFICATION: I certify that all information reported to qualify for federal student aid is complete and correct.					For office use only:	
Student Signature D		Date				
Miami Uni	iversity - One Stop for Student Success S	ervices - 301 S. Cam	pus Ave Oxford, OH 45056			

513-529-0001 - Email: OneStop@MiamiOH.edu - Fax: 513-529-8713 - Web: MiamiOH.edu/OneStop