

STUDENT INFORMATION

Student Name _____

Banner ID + _____

Please check the appropriate semester period:

☐ **Fall Semester 2014**
(Required after September 13, 2014)
☐ **Spring Semester 2015**
(Required after February 12, 2015)

Students must continue to attend class to remain eligible for federal aid, even if they have been dropped from their classes. **I, the undersigned professor**, state that to the best of my knowledge the student listed above has been attending class and performing functions required of a student taking this course.

Note: All fields must be completed by your professor(s).

| | | | |
|--|------------------------|--------------|--|
| Date student began attending class ____/____/____ | Course name and number | Credit Hours | Professor's Signature and Date: Print Professor's Name below: |
| Date student began attending class ____/____/____ | Course name and number | Credit Hours | Professor's Signature and Date: Print Professor's Name below: |
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| Date student began attending class ____/____/____ | Course name and number | Credit Hours | Professor's Signature and Date: Print Professor's Name below: |

Note: Please notify us if you were enrolled in a sprint class **prior** to the class cancellation date and your class has not yet started.

| | | |
|-------------------------|--------------|--------------------|
| Print Course and number | Credit Hours | Date class begins: |
|-------------------------|--------------|--------------------|

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