

Alternative Programs Form 2018-2019

STUDENT INFORMATION				
Student Name		Banner ID +		
You are classified by the Registrar's Office as a non-degree seeking or second Bachelor's student. Non-degree students are not eligible for federal financial aid. Submit the applicable information from the sections below to the One Stop.				
I am not seeking a second Bachelor's degree, Teacher Certification/Licensure, and I am not a conditional graduate student.				
SECOND BACHELOR'S DEGREE				
If you are pursuing a second undergraduate degree, you must be enrolled in a different degree program than the one you previously completed in order to be eligible for financial aid. YOUR ACADEMIC ADVISOR SHOULD COMPLETE THE INFORMATION BELOW.				
1.			te granted:	
2.	List type of degree that student is currently seeking:			
3.	The number of credit hours from all previous degrees that will count towards new/current degree according to a			
4.	DARS audit: 4. Additional credit hours needed to complete degree (Including current enrollment):			
Academic	Advisor Signature	Date	Print Advisor Name	Advisor Phone Number
TEACHER CERTIFICATION/LICENSURE				
TO BE COMPLETED BY AN ACADEMIC ADVISOR. Students seeking principal or leadership licensure are ineligible.				
List the program the student has applied to and will receive certification/licensure:				
2.	Attach the student's specific plan of coursework by academic semester. This plan must list each course subject &			
	number.			
3.	Are the courses in the attached plan of study required for certification/licensure? YES NO			
4.	4. What is the student's expected program completion date:			
Academic	Advisor Signature	Date	Print Advisor Name	Advisor Phone Number
CONDITIONAL GRADUATE STUDENT				
TO BE COMPLETED BY AN ACADEMIC ADVISOR.				
Has the student been officially accepted or conditionally accepted into the graduate school? YES NO				
2.	The reason for the conditional status: (check one);			
	Low GRE test scores	Low undergradu	uate GPA Prerequisite courses r	needed Late application
3.	Attach the student's plan of cour number.	sework to be taker	n by academic semester. This plan n	nust list each course subject &
Academic	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		Date		
E12 E20	Miami University - One Stop - 30 -0001 Email: OneSton@MiamiOH edu	•	•	

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