

CERTIFICATE PROGRAM ENROLLMENT VERIFICATION FORM

The student listed below is applying for an educational loan through the Stafford Student Loan Program or other Auxiliary Loan Program. In order to process the student's application, we must verify the student's enrollment in the certificate program indicated.

1. General Information (to be completed by the student):

Name Social Security Number

Local Address: _____

_____ Tel#: _____

II. Enrollment Information (to be completed by Program Administrator/Advisor):

Name of Certificate Program: _____

Facilitator/Advisor: _____

Program Site: _____

Program Dates: From: _____ To: _____

Student's Expected Enrollment Dates: From: _____ To: _____

Student will be considered a _____ Full-time Student _____ Half-time Student

_____ Less than half-time Student

Cost of Program \$ _____

Will the student be funded? _____ Yes _____ No

If yes, how much will be covered? \$ _____

Does this include a Tuition Waiver? _____

Administrator/Advisor's Signature

Date