

University of Minnesota Duluth
PETITION TO REINSTATE FINANCIAL AID ELIGIBILITY
For students who currently have a degree

2007–2008 Academic Year
LELPT

The Office of Financial Aid and Registrar has received your *July 1, 2007– June 30, 2008 Free Application for Federal Student Aid (FAFSA)* results. You indicated that you have received a bachelor’s degree and plan to be enrolled as an undergraduate student in academic year 2007–2008.

To be considered for financial aid, you must be officially admitted to and enrolled in an eligible undergraduate degree-seeking program, certificate or licensure program at the University of Minnesota Duluth. You may be eligible for student loans for one 12-consecutive-month period if you are required to complete prerequisite course work before admission to an undergraduate, graduate, or professional program, including pharmacy. Only required credits will be accepted for the payment of financial aid. If you are adding another major to a bachelor’s degree you have already received from the University of Minnesota Duluth, you are not eligible for financial aid.

SECTION A—to be completed by the student		
Student name—Please type or print neatly in ink.		
Last	First	Middle
Student ID number	U of M e-mail @d.umn.edu	
<input type="checkbox"/> I do not have my first bachelor's degree. Complete Section B.		
<input type="checkbox"/> I have a _____ degree in _____ (e.g., B.S. degree in chemistry, B.A. degree in sociology) from _____ and I am/I will be enrolled as of (term/year) _____ / _____ in a second undergraduate program resulting in another degree. Complete Section B and then if you have been admitted to a second undergraduate degree program for the 2007–2008 school year, take this form to your college office to have Sections C and D completed.		
<input type="checkbox"/> I am enrolled in a certificate program through Continuing Education (CE) or a licensure program through the College of Education and Human Service Professions (CEHSP). Take this form to the CE certificate adviser or the licensure coordinator in CEHSP to have Sections C and D completed.		
<input type="checkbox"/> I am required to take prerequisite courses to be considered for admission to an undergraduate, graduate, or professional program, including pharmacy. Complete Sections B and C.		
<input type="checkbox"/> I am/I will be enrolled as of (term/year) _____ / _____ in a graduate or professional (including pharmacy) program. Complete Section B.		
SECTION B—to be completed by the student		
I certify that all information provided is true and correct to the best of my knowledge.		
Student signature	Date	

To request copies of this form in an alternative format: 218-726-8000. UMD is an equal opportunity employer and educator.

RETURN this form to:

Student Assistance Center, 23 Solon Campus Center

or mail it to:

Office of Financial Aid and Registrar
University of Minnesota Duluth
1049 University Drive
Duluth MN 55812-3011

Phone: 218-726-8000
E-mail: umdhelp@d.umn.edu



SECTION C--important information for the student

Only required courses are accepted for the payment of financial aid. Your registration in these required courses will be verified each term. This petition will be returned if this documentation is not provided.

Attach documentation as follows:

If enrolled in an **additional undergraduate degree program**, attach a list of required courses needed to complete your program, signed by your adviser.

If enrolled in a **certificate or licensure program**, attach a list of required courses needed to complete your program, signed by the CE certificate adviser or the licensure coordinator in CEHSP.

If enrolled in **prerequisite courses** to be considered for admission to an undergraduate, graduate, or professional program at UMD, attach a list of required prerequisite courses, signed by your adviser or department head. Prerequisite status is for one 12-consecutive-month period, and students must be enrolled at least half-time (6 credits) each term to receive financial aid.

SECTION D--to be completed by the college office

Return this completed form to the Office of Financial Aid and Registrar at the address on the reverse side. The student must receive an additional undergraduate degree, certificate, or licensure upon program completion; adding another major to a degree already received is not a certifiable academic status.

I certify that the student named on the front of this form is admitted to the following:

Check one: Undergraduate degree program Certificate program Licensure program

Circle one: Grade level: 1 2 3 4 5+

Name of additional degree, certificate, or licensure program (not major)	College	Admission date (term/year)
College adviser/department head (type or print)	Title	
College office or department	Telephone number	
Adviser/department head signature	Date	