



2018-2019 Program of Study Form

Student Name: _____ ID#: _____ Phone#: _____

Will/did you receive a high school diploma/GED before enrolling for college?

_____ Yes _____ No

Name of high school you attended _____

Date of graduation or anticipated graduation date from high school _____/_____/_____

Do you have a Bachelor's Degree (*includes those received from a foreign country*)?

_____ Yes _____ No

What is your grade level?

- Never attended, 1st year
- 1st year, attended before (1-29 hours)
- 2nd year/sophomore (30-59 hours)
- 3rd year/junior (60-89 hours)
- 4th year/senior (90 plus hours)

What degree or certificate will you be pursuing during 2018-2019 school year?

- Certificate of less than 2 years
- Certificate of at least 2 years
- Associate Degree (occupational or technical program)
- Associate Degree (general education)

Signatures

I understand that the financial aid office may request additional documentation. I further understand that my financial aid will remain incomplete until all necessary documents are submitted.

I certify that all information reported on this form is complete and correct to the best of my knowledge. I authorize the Financial Aid Office at TSC to make corrections necessary to resolve any discrepancies found.

WARNING: *If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.*

Student signature: _____ Date: ____/____/_____

For Office Use Only: Received by _____