



Office of Enrollment Management
Financial Aid & Scholarships

2018-2019 NON-MATRICULATING CERTIFICATION STATEMENT

Student's Name: _____ LSU ID: 89 - _____ - _____

To be eligible for any federal financial aid program, a student must be enrolled in a degree or certificate program. Our records indicate that you are currently classified as a non-matriculating student, and therefore you do not meet this requirement. In certain circumstances, non-matriculating students may be considered for aid. Based on the information provided on this form, our office will determine if you are eligible to be considered for federal financial aid as a non-matriculating student. Please note that if you are approved to receive aid, your annual loan limit as a non-matriculating student is less than that of a degree-seeking student. Non-matriculating students may only receive aid for a period not to exceed 12 consecutive months. *(Please use only black or blue ink when completing this document.)*

Please select the type of program and list the degree or certificate you will be working on as a non-matriculating student and submit this form to your academic advisor of the academic college in which you plan to enroll.

- ☐ Undergraduate at LSU-BR _____, _____
(curriculum) (degree type - B. A., B. S., etc.)
- ☐ Graduate at LSU-BR _____, _____
(curriculum) (degree type - M. A., M. S., etc.)
- ☐ Certificate at LSU-BR _____
- ☐ _____ at _____
(name of degree/certificate and curriculum) (*name of institution)

*If you plan to pursue a degree/certification requirements at another institution, please contact our office for additional instructions.

Note: *Electronic signatures will not be accepted.*

Student's Signature: _____ Date: _____

TO BE COMPLETED BY ACADEMIC ADVISOR

*Please answer each of the following statements regarding the reason(s) the student will be considered non-matriculating during the 2017-2018 academic year. ***Please include additional documentation verifying the course requirements for students who are satisfying pre-requisites or are fulfilling certification requirements.****

EACH STATEMENT BELOW MUST BE ANSWERED.

- ☐ Yes ☐ No Has the student applied for admission to the program listed above?
- ☐ Yes ☐ No Has the student taken all courses required for admission into the program listed above?
If no, please attach supplemental documentation verifying which course(s) are needed for admission into the program.
- ☐ Yes ☐ No Has the student met the required GPA for admission into the program listed above?
Required GPA: _____ Student GPA: _____
- ☐ Yes ☐ No Has the student taken all entrance exams, such as the GRE, MCAT, PRAXIS, etc? *(if applicable)*
Type of Exam: _____ Required Score: _____ Student Score: _____
- ☐ Yes ☐ No Is there any additional admission requirement the student is lacking?
If so, please indicate the reason: _____

Signature of Academic Advisor: _____ Date: _____

Print name and title: _____ Ext: _____

***Academic Advisor:** Once completed, please submit to our office in 1146 Pleasant Hall via campus mail or fax (8-6300). We will not be able to accept the document if returned by the student.