

Office of Financial Aid & Scholarships

2025-2026 NON-MATRICULATING CERTIFICATION STATEMENT

Student	s Name: _	LSU ID: 89	
Workda	y ID:		
matricul note tha	y classified ating stud t if you are	federal financial aid, a student must be enrolled in a degree or certificate program. Our records indicate that you are d as a non-matriculating student, and therefore you do not meet this requirement. In certain circumstances, nonents may be considered for aid. This form must be completed so that our office can determine your eligibility. Please approved to receive aid, your annual loan limit as a non-matriculating student is less than that of a degree-seeking iculating students may only receive aid for a period not to exceed 12 consecutive months.	
Please s	elect the ty	pleted by student up of program and list the degree or certificate you will be working towards as a non-matriculating student. Submit academic advisor for the academic college in which you intend to enroll.	
☐ Unde	ergraduate	at LSU-BR,	
		(curriculum, degree type - B. A., B. S., etc.) U-BR,,,,	
		(curriculum, degree type - M. A., M. S., etc.) SU-BR	
		at	
instructi	*If you	atat	
Note: E	lectronic s	signatures will not be accepted.	
Student	s Signatur	e: Date:	
DA DE I	T 75 1		
Please a	inswer ead	ompleted by Academic Advisor th of the following statements and include additional documentation verifying the course requirements for satisfying pre-requisites or are fulfilling certification requirements.	
□ 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? (<i>if applicable</i>) 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:	
Signatur	e of Acad	emic Advisor: Date:	
Print na	me and titl	e: Ext:	

*Academic Advisor: Once completed, please submit to our office in Pleasant Hall via campus mail or lsu.edu/verification. We will not be able to accept the document if returned by the student.