Financial Aid Appeal for Degree Holders  
Second Degree, Teaching Certification, Pre-Requisite Coursework

A. Student Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>UT EID</th>
</tr>
</thead>
</table>

B. Student Objective*

- **Second Degree**
  - Degree Sought: ____________________________
  - Program Name: ____________________________

- **Teaching Certification**
  - Preparation for: ____________________________

- **Pre-Requisite Coursework**
  - Ex: Admission to graduate school

*Please note, awards will not release until you are officially admitted into the college, major, and/or program you list here.

<table>
<thead>
<tr>
<th>Degree(s) Received</th>
<th>Awarding Institution</th>
<th>Hours Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

C. Signature

By signing this appeal, I certify that all the information provided here and on any submitted supporting documentation is accurate and complete to the best of my knowledge. I also understand, as a degree holder, I am only eligible for Federal Direct loans.

Student Signature ____________________________ Date ____________________________

To be completed by Academic Advisor prior to submitting to Office of Financial Aid

<table>
<thead>
<tr>
<th>Start Date: ____________________________ (month/year)</th>
<th>Expected Completion Date: ____________________________ (month/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours Required: ____________________________</td>
<td>Hours Remaining: ____________________________</td>
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</tbody>
</table>

**Second Degree**
- Will student receive another degree?  □ Yes □ No
- If yes, indicate degree and program name: ____________________________
- Ex: B.A., Government
- Hours from prior degree(s) that apply to new degree: ____________________________

**Teaching Certification**
- Is student seeking teaching certification?  □ Yes □ No

**Pre-Requisite Coursework**
- Is student enrolled in pre-requisite coursework only?  □ Yes □ No
- If yes, indicate reason for enrollment: ____________________________
- Ex: Admission to graduate school

Comments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Advisor Name ____________________________ Signature ____________________________ E-mail ____________________________

Academic Department ____________________________ School/College ____________________________