CERTIFICATE COURSE VERIFICATION

Federal, state and institutional regulations require documentation of course requirements for approved graduate and teacher certificate programs for students who are also financial aid recipients. Therefore, for you to be considered for financial aid, this form must be completed by you and your Program Director. Completion of this form does not guarantee a financial aid award; it is a requirement for consideration of the award.

Student Name					Banner ID Number		
Entry Term:	Fall	Spring	Summer				
	Year	Year		Year			
Please select which certificate program you are pursuing:							
I am pursuing a Graduate Certificate in the following program (select one):							
Addiction Counseling, 12 SH, 30 Weeks, (423A/13.1102)				Gero	Gerontology, 15 SH, 30 Weeks, (110A/30.1101)		
Appalachian Studies, 18 SH, 30 Weeks, (200A/05.0199)				Midd	Middle and Secondary Education, 18 SH, 52 Weeks, (446A/13.1206)		
Autism Spectrum Disorders, 12 SH, 30 Weeks, (445A/13.1013)				Planr	Planning, 18 SH, 30 Weeks, (109A/45.0701)		
Business Analytics, 15 SH, 30 Weeks, (340A/11.0802)				Read	Reading Education Post-Master's Certificate, 18 SH, 30 Weeks,		
Educational Media Instructional Technology: Web- based				(4	475A/13.1315)		

Educational Media Instructional Technology: Web- based Distance Learning, 15 SH, 30 Weeks, (419A/13.0501)
Elementary Mathematics Education, 18 SH, 52 Weeks, (711A/13.1202)
Expressive Arts Therapy, 18 SH, 30 Weeks, (425A/13.1102)
French, 18 SH, 30 Weeks, (108A/16.0999)
Geographic Information Science, 12 SH, 30 Weeks, (114A/45.0701)

Rhetoric and Composition, 15 SH, 30 Weeks, (132A/23.0101)

School Leadership, 24 SH, 67 Weeks, (473A/13.0409)

Sociology, 18 SH, 52 Weeks, (127A/45.1101)

Spanish, 18 SH, 30 Weeks, (111A/16.0999) Women's Studies, 12 SH, 30 Weeks, (130A/05.0207)

I am pursuing an Undergraduate Teaching Certificate/Licensure

By signing below, I certify that I <u>will not</u> enroll in courses which are not listed on my program of study. If I do enroll in courses which are not listed on my program of study I understand I am not eligible for financial aid.

Student Signature (Electronic Signatures ARE NOT Accepted)

Date

<u>NOTE: You, the student, are responsible for obtaining a copy of your Program of Study AND the required signature</u> below before returning this form to the Office of Student Financial Aid. Incomplete forms will not be processed.

DEPARTMENT/PROGRAM DIRECTOR VERIFICATION

I verify that the above named student is pursuing requirements for the program noted above. A copy of the student's approved program of study (outlining course requirements for completion of the certificate program at Appalachian State University) is attached.

Signature (Electronic Signatures ARE NOT Accepted)

Title

Printed Name

Date