

PROGRAM CLARIFICATION**Academic Year 2009–2010****Return this form****By mail to:**

One Stop Student Services
 University of Minnesota, Twin Cities
 200 Fraser Hall, 106 Pleasant St. SE
 Minneapolis, MN 55455-0422

On campus at:

200 Fraser Hall, East Bank
 130 West Bank Skyway, West Bank
 130 Coffey Hall, St. Paul

Questions?

Phone: 612-624-1111
 TTY (hearing impaired): 612-626-0701
 E-mail: helpingu@umn.edu

DIRECTIONS—Your 2009–2010 Free Application for Federal Student Aid (FAFSA) is temporarily on hold because your application has incomplete or conflicting information regarding your program and/or previous degree. Please sign and send your completed form to One Stop Student Services (see addresses on the right). Processing of your financial aid application will continue when the missing information is received.

To complete online, open this form in Adobe Reader software, not a Web browser, to ensure the privacy of your information. Place the cursor in a field and type. Print a copy to add the required signature(s).

PART A. Student information

Name (Last, first, MI)

Birth date

Student ID number

Phone number (include area code)

PART B. Program and/or degree clarification

Please read each of the following questions carefully and complete the information as instructed.

1. Will you be attending the University of Minnesota, Twin Cities, during the 2009–2010 academic year? yes no

If NO, please STOP HERE and submit this form to the address listed above.

If YES, please provide the applicable information for the rest of the fields on this form and then return the form.

2. Have you received a bachelor's degree, or will you receive one prior to fall term 2009? yes no

If YES, list the name of the school conferring the degree and the date the degree was received.

Name of school	Date
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I am officially admitted to the following degree, certificate, or graduate program for the 2009–2010 academic year:

Name of program	Effective term/year
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3. Check all boxes that describe your student status during fall and spring semesters of the 2009–2010 academic year.

During the **2009 fall semester** I will:

- have undergraduate student status as a freshman sophomore junior senior 5th year or beyond
 be a graduate/professional student in my 1st year 2nd year 3rd year beyond 3rd year

During the **2010 spring semester** I will:

- have undergraduate student status as a freshman sophomore junior senior 5th year or beyond
 be a graduate/professional student in my 1st year 2nd year 3rd year beyond 3rd year

PART C. Certification

You must sign this form certifying that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancelation or repayment of financial aid, whenever discovered.

Student signature

Date



To request copies of this form in an alternative format, please call the Disabilities Services liaison for financial aid at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator.

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