



AUGUSTA STATE UNIVERSITY
 Financial Aid Office
 2500 Walton Way
 Augusta, GA 30904
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 Fax: 706-737-1777
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**FINANCIAL AID AGREEMENT FOR POST BACCALAUREATE, POST GRADUATE AND
 ADDITIONAL UNDERGRADUATE DEGREE STUDENTS**

As a potential recipient of Federal Work Study, Perkins Loan and/or Stafford Loan funds, I certify that I am enrolling in required courses to pursue teacher’s certification/recertification or to be accepted in a graduate degree program or to earn an additional undergraduate degree at Augusta State University. I will register for at least six credit hours of coursework per semester as designated on the required course listing provided by my advising department. I understand that the copy of my required course listing must be submitted with this form (or that my courses may be listed below by my advisor) before my Stafford Loan Application will be processed or any Federal Work Study or Perkins Loan funds will be awarded. I also understand that optional courses for professional recognition or advancement, courses required for entry into a program at another college or university and/or courses taken to raise my GPA are prohibited, and if I deviate from the required course listing, I must repay any and all funds received.

I understand that if I drop below six credit hours of required course work during the loan period, all subsequent loan disbursements will be forfeited.

Should I receive Federal Work Study, Perkins Loan or Stafford Loan funds for which I do not qualify, I understand I will be required to pay those funds back in full prior to being able to reenroll or receive further financial aid.

I acknowledge that I have read and understand the above terms.

Student’s Name _____ Student ID _____

Student’s Signature _____ Date _____

THIS SECTION SHOULD BE COMPLETED BY YOUR ADVISOR AND/OR ADVISING DEPARTMENT

The above named student is: _____ seeking teacher certification/recertification at Augusta State University.
 _____ taking prerequisite courses in order to be accepted into Augusta State University’s
 _____ Graduate Program.
 _____ seeking an additional degree in _____
 at Augusta State University.

The following list of courses are required for this student. (Please list courses here OR attach required course listing to this form.)

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Advisor’s Name _____ Date _____

Advisor’s Signature _____