

May Hall, Room 111
Financial Aid
Dickinson State University
291 Campus Drive
Dickinson, ND 58601-4896

Office Hours: 7:45 a.m. - 4:30 p.m. Monday - Friday Phone: 1-800-279-4295 ext. 2 or 701-502-4407

Fax: 701-483-2409

Web: www.dickinsonstate.edu

Email: dsu.financialaid@dickinsonstate.edu

## **Second Bachelor's Degree Form**

Name:(First)			MPLID:	Date of Birth:
	(Last)	(Middle)		
Email:			Phor	ne:
<ul><li>You are</li><li>You are</li></ul>	d on your financial aid application the enrolling in undergraduate courses enrolling in undergraduate courses enrolling in a teacher certification p	to receive a second bache in preparation for a gradua	elor's degree, or	ible for federal financial aid only if:
Please note that it	f you are completing work for a seco	ond major you are <b>NOT</b> eli	gible for federal fina	ncial aid.
	re a bachelor's degree are not eligib d above <u>may</u> be eligible for loan pro	_	al Pell Grant, SEOG	, or State Grant. Students who meet the
The Plan	of Study, located on the next μ	page, must be complete	ed with your adv	isor and submitted with this form.
have	credits left to earn prior to r	receiving this second degre	e/teacher certificati	on.
should complete	the program requirements specified	d above for a second degre	e/teacher certificati	on by:(Date)
Student Signature				_
- ta a c	}		Date	
-				form to the Financial Aid Office.
Have Acade	emic Records complete th	is section and return e in (specify degree here)	rn the signed	form to the Financial Aid Office.  and is completing work for a
Have Acade	emic Records complete the	is section and returned in (specify degree here)	rn the signed	and is completing work for a
Have Acade	emic Records complete the The student has a bachelor's degree degree (specify degree here)	is section and return e in (specify degree here) reparation for a graduate p	rn the signed to	and is completing work for a
Have Acade	The student has a bachelor's degred degree (specify degree here)  The student is completing work in postudent is enrolled in a teacher	e in (specify degree here) reparation for a graduate p	rn the signed to	and is completing work for a

## Plan of Study

TERM	Subject & Catalog # (i.e ENGL 300)	CREDIT HOURS
Fall		
Spring		
TERM	Subject & Catalog # (i.e ENGL 300)	CREDIT HOURS
Fall	,	
-		
Coring		
Spring		
	Subject & Catalog # (i.e ENGL 300)	CREDIT HOURS
Fall		
Spring		
L	TOTAL CREDITS	
g here, I have reviewed and agree	that the above classes will fulfil	I the requirements for the specif
Addition 10th 10th 10th 10th 10th		
Advisor/Other Official Name (Pleas	se Print) Ac	cademic Unit/Department
Advisor/Other Official Signat	 ure	 Date
		<del></del>