

## PROGRAM CLARIFICATION

**Academic Year 2020-2021**

**DIRECTIONS**—Your 2020-2021 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.

**RETURN FORM:**

**BY MAIL TO:**  
Office of Student Finance  
200 Fraser Hall  
106 Pleasant St. SE  
Minneapolis, MN 55455

**IN PERSON ON CAMPUS AT:**  
**One Stop Student Services**  
333 Robert H. Bruininks Hall

**Questions?**  
Phone: 612-624-1111  
TTY (hearing impaired): 612-626-0701  
Email: onestop@umn.edu

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

PART A. Student information				
Name (last, first, middle initial)				
Birthdate (mm/dd/yyyy)	University ID	Phone (include area code)		
PART B. Program and/or degree clarification				
Please read each of the following questions carefully and complete the information as instructed.				
<p><b>1. Will you be attending the University of Minnesota, Twin Cities or Rochester during the 2020-2021 academic year?</b> <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>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.</p>				
<p><b>2. Have you received a bachelor's degree or equivalent, or will you receive one prior to fall term 2020?</b> <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>If YES, list the name of the school conferring the degree and the date the degree was received.</p> <table border="1"> <tr> <td>Name of school</td> <td>Date</td> </tr> </table>			Name of school	Date
Name of school	Date			
<p>I am officially admitted to the following degree, certificate, or graduate program for the 2020-2021 academic year:</p> <table border="1"> <tr> <td>Name of program</td> <td>Effective term/year</td> </tr> </table>			Name of program	Effective term/year
Name of program	Effective term/year			
<p><b>3. Check all boxes that describe your student status during fall and spring semesters of the 2020-2021 academic year.</b> During the <b>2020 fall semester</b> I will:</p> <p><input type="checkbox"/> have undergraduate student status as a <input type="checkbox"/> freshman <input type="checkbox"/> sophomore <input type="checkbox"/> junior <input type="checkbox"/> senior <input type="checkbox"/> 5th year or beyond</p> <p><input type="checkbox"/> be a graduate/professional student in my <input type="checkbox"/> 1st year <input type="checkbox"/> 2nd year <input type="checkbox"/> 3rd year <input type="checkbox"/> beyond 3rd year</p> <p>During the <b>2021 spring semester</b> I will:</p> <p><input type="checkbox"/> have undergraduate student status as a <input type="checkbox"/> freshman <input type="checkbox"/> sophomore <input type="checkbox"/> junior <input type="checkbox"/> senior <input type="checkbox"/> 5th year or beyond</p> <p><input type="checkbox"/> be a graduate/professional student in my <input type="checkbox"/> 1st year <input type="checkbox"/> 2nd year <input type="checkbox"/> 3rd year <input type="checkbox"/> beyond 3rd year</p>				
PART C. Certification				
<p>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.</p>				
Student signature	Date			

To request copies of this form in an alternative format, call Disability Resource Center at 612-626-1333. The University of Minnesota is an equal opportunity employer and educator. This form is printed on paper made from no less than 20 percent post-consumer waste.

