

| TEACHER CERTIFICATION/LICENSURE FORM | |
|--|---|
| Name | MI Student ID |
| E-mail | |
| This form and a graduation plan or plan of study must be subm financial aid. | nitted to continue processing your federal |
| To be eligible for federal financial aid, a student must: | |
| \Rightarrow have a current FAFSA on file, | |
| \Rightarrow be registered for classes required for the specific certificate | program, |
| \Rightarrow indicate below the basis for your continuing eligibility, and | |
| \Rightarrow provide documentation from your faculty advisor to suppor | t your claim. |
| STUDENT'S EDUCATION CERTIFYING STATEMENT | |
| For Academic Year | |
| I am applying for federal aid on the basis of being enrolled in at I for elementary or secondary teacher certification/licensure in No understand that any optional courses that I elect to take for profe courses recommended by my school district but not required for s financial aid. | rth Carolina where I plan to teach. I further essional recognition or advancement, and/or |
| Student's Signature | Date |
| ADVISOR'S STATEMENT | |
| I have reviewed the above certification and confirm the educatio | nal objectives of this student. |
| Attached is a signed copy of the | Certificate/Licensure Graduation Plan |
| for the above-mentioned student. | |
| Total number of hours required to complete program of stud | dy: |
| Advisor's Signature | Date |
| Advisor's Name (Please Print) | |