

Program of Study Verification

University of Central Missouri Student Financial Services P.O. Box 800 Warrensburg, MO 64093-5178

Phone 660-543-8266 FAX 660-543-8080 Webpage: <u>www.ucmo.edu/sfs</u> Documents Only Email: financialassistance@ucmo.edu

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You <u>DO NOT</u> need to complete or submit this form if you are awaiting acceptance into a GRADUATE degree program. Student Financial Services will be notified automatically upon your acceptance or denial and will update the requirement on your MyCentral.

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Student's Name (please print)		UCM ID Number
		ORMATION AND REQUIRED DOCUMENTS RDING OF YOUR FINANCIAL AID.
Please	e check the box below that best matches	your situation:
	I've been fully admitted by UCM to purs	sue my 1st bachelors degree, beginning with the
	Semester, 20 My degree o	bjective is a Bachelor of
	My program major is	
	1. I have been fully admitted by UCM to pursue a 2nd bachelors degree , beginning with the	
	Semester, 20 My degree	ee objective is a Bachelor of
	2. My program major is	
	3. My expected Graduation/Completion D	Date is:
	4. My first degree was a Bachelor of	
	5. My program major was	
	I have been fully admitted by UCM to pursue a teacher certification program, beginning with the Semester, 20	
	The subject area I'll be certified to teach i	s
	I am enrolling for prerequisite classes required to be admitted to a UCM graduate degree.	
	I am enrolling as a visiting or special student and have not been fully admitted to a UCM degree or teaching certificate program.	
	I have not yet completed my high school degree , but will finish this degree in	
	I have decided not to attend the Universi	ty of Central Missouri.
Student	nt's Signature	Date

Complete and submit this form (and the required documents) to UCM **Student Financial Services** in person (1100 Ward Edwards Bldg.) or by mail (Student Financial Services, P.O. Box 800, Warrensburg MO 64093-5178), or by fax (660-543-8080).