



Office of Financial Aid & Scholarships
Degree Completion Plan

Financial Aid Office Use ONLY ___ Appeal ___ Post Degree ___ Prerequisites*

*Prerequisites must include a Preparatory Coursework Form

This form is to be completed by the student's academic advisor or authorized representative within the academic department. Its purpose is to assist in clarifying the student's degree completion date, which is used to determine appropriate financial assistance.

▶ **STEP 1 - STUDENT INFORMATION**

Student name (Last name, First name)	
A-State ID number	Cell phone number

▶ **STEP 2 - DEGREE INFORMATION**

Degree being sought	Advisor's name
Total hours required to complete degree	Academic department
Hours <u>only</u> remaining to complete degree	Expected graduation date (semester/year)
Has the student been admitted into this degree program? <input type="checkbox"/> Yes <input type="checkbox"/> No	

▶ **STEP 3 - TENTATIVE PLAN FOR COMPLETING THE DEGREE**

Term	Course Name/Number	# of Hours	Term	Course Name/Number	# of Hours
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

▶ **STEP 4 - SIGNATURES**

X ADVISOR SIGNATURE	Date
X STUDENT SIGNATURE	Date