

2017-2018 NON-DEGREE ELIGIBILITY APPEAL

Student Last Name	First Name	MI	UT ID Number								
			0	0	0	-		-			
UT Email Address						Cell Phone Number					

This form is to determine the potential eligibility of non-degree students for federal financial aid non-degree enrollment eligibility requirement. Only coursework required for the student to be admitted into a degree program at the University of Tennessee should be listed below. **This does not include courses contained in the degree program of study.** Students must submit the completed form on a semester basis to the Office of Financial Aid & Scholarships before federal financial aid will be processed.

Note: Non-degree students taking prerequisites to enter a degree-seeking program at the University of Tennessee are only eligible for the Direct Loan program. A minimum of six (6) credit hours per semester is required to receive Direct Loans. ***An eligible non-degree student may only receive financial aid for a period of 12 consecutive months.***

A new form must be completed each semester that you want to be considered as a non-degree student.

- I am taking courses required to be admitted into a degree seeking program at the University of Tennessee, Knoxville. The program is a(n) Undergraduate degree program Graduate degree program
- I anticipate that I will be admitted into the _____ degree program in _____ (Month/Year).
- I am not taking pre-requisite courses. I am taking courses needed for teacher licensure.
- I understand I am only potentially eligible for aid as a Non-Degree seeking student for **ONE CALENDAR YEAR** (approximately 3 consecutive semesters).

Student signature _____

Date _____

Prerequisite Listing

Check One - Fall 2017 Spring 2018 Summer 2018

Course Number	Course Name

Department Chair Certification Statement

I certify that the above named student is enrolled in the courses listed above, which are **required** for entry into the _____ program at the University of Tennessee.

Department Chair Name (Please Print) _____

Department _____

Telephone Number _____

Department Chair Signature _____

Date _____