

Financial Aid Office

5150 N. Maple Avenue, M/S JA 64 Fresno, CA 93740-8026 Phone: (559) 278-2182 Fax: (559) 278-4833 www.fresnostate.edu/studentaffairs/financialaid/

Prerequisite Statement for Loan Funding				
STUDENT ID	STUDENT LAST NAME	STUDENT FIRST	NAME PHO	ONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK				
Note: Funding for Prerequisite coursework is only available in the form of student loans for one consecutive 12-month period (not per program) beginning on the first day of the loan period and if you have not previously received financial aid for prerequisite courses.				
 In order to be considered for funding, you must: Submit a 2014-2015 FAFSA, and Complete and submit this form, and Provide a signed letter on department letterhead from an advisor/program coordinator/department representative verifying the professional objective, school requiring the prerequisites and the required prerequisite coursework. 				
Please complete the following regarding your proposed enrollment plan:				
Professional Objective (e.g. Medicine; Veterinary):				
School that requires prerequisites (e.g. Craig School of Business):				
Prerequisite classes & Course Numbers required (e.g. FIN 120):				
FALL SEMEST	•	SPRING SEMESTER	S	UMMER SEMESTER
Course # Course Name	Course #	Course Name		Course Name
CERTIFICATION & SIGNATURE				
I certify that I have not received any FFELP (including Subsidized and/or Unsubsidized loans) or Federal Direct Loans in the past for prerequisite or preparatory coursework taken to gain admission into a program at any level.				
Signature <u>:</u>			Date:	
OFFICE USE ONLY				
☐ DEPT LTR ☐ COURSE	ES VERIFIED	AWARDED	☐ PERSONAL COMM	ENTS
Comments:				

Date___