

2008-2009
GEORGIA SOUTHERN UNIVERSITY
DEPARTMENT OF FINANCIAL AID
INDEPENDENT POST-SECONDARY ENROLLMENT CERTIFICATION

Please read and follow instructions on the back of this form.



Section A: Georgia Southern University Student Information

GSU STUDENT'S NAME

EAGLE ID NUMBER



Section B: To be completed by Spouse/Dependent.

I authorize the release of the information requested below to Georgia Southern University.

Other Student's Name (Please Print): _____ SSN: _____

will will not be attending a post-secondary institution during the 2008-2009 academic year for the enrollment period between 7/1/2008 and 6/30/2009.

Spouse/Dependent Signature

College, University or Other Post-Secondary Institution

After Section B is complete, YOU must mail this form to the school listed in Section B for them to complete Section C. DO NOT RETURN THIS FORM BLANK. Read the instructions on the back of this form.



Section C: To be Completed by The Financial Aid Office at the Institution listed in Section B.
Please provide the following information regarding the student indicated in Section B.

Expected Date of Graduation (Month/Year) _____/_____

Dependency Status Dependent
 Independent
 Not Determined

Admission Has Been Accepted
 Has Not Been Accepted

Expected/Current Enrollment Status Full-Time Not Enrolled
 Three-Fourth Time
 Half-Time
 Less Than Half-Time

I certify that the above information is accurate to the best of my knowledge.

Financial Aid Officer Signature

Print Name and Title

Institution

Date

Return form directly to:
Georgia Southern University
Department of Financial Aid
Post Office Box 8065
Statesboro, GA 30460
(912) 681-5413
FAX: (912) 486-7418

SPOUSE AND DEPENDENT ENROLLMENT CERTIFICATION

Dear Student:

The Department of Financial Aid is currently participating in a Quality Assurance Program developed by the U.S. Department of Education to determine the accuracy of information used in the financial aid process. The information that you provided on your Free Application for Financial Aid (FAFSA) indicated that you will have a spouse/dependent enrolled at least half-time in a post-secondary educational institution during the 2008-2009 academic year. We are requesting that you confirm your spouse/dependent's enrollment status at this time.

On the back of this letter is an enrollment certification form. Please complete this form in the following order:

1. **Section A:** Fill in the **NAME** and the **EAGLE ID Number** of the student attending Georgia Southern University.
2. **Section B:** Fill in the name and social security number of the spouse or dependent of the student listed in **Section A**, that is also attending a post-secondary institution at least half-time. **After this section is completed, YOU must send this form to the College, University or other Post-Secondary Institution listed in Section B.** If the student in Section B will not attend, please mark the box under this section as shown:
 will will not be attending a post-secondary institution, etc.
Do not return this form blank. Incomplete forms will be returned to you.
3. **Section C:** Must be completed by the Financial Aid Office at the Institution listed in **Section B** and returned to the **Georgia Southern University Department of Financial Aid.**

If you have more than one family member attending a post-secondary institution, please photocopy this form as needed.

If your spouse/dependent will not be enrolled at least half-time, please notify us immediately. Your financial aid information will be revised accordingly. Failure to submit this form will result in an automatic revision of your financial aid and a possible delay in receiving your financial aid for the academic year.

If you have any questions or concerns about this request, please feel free to contact our office.

Sincerely,

Georgia Southern University
Department of Financial Aid