

## 2020-2021 COURSE APPROVAL FORM

**STUDENT INFORMATION**

Please complete this form in its entirety and return to the Office of Financial Aid at Governors State University. **Incomplete paperwork will not be accepted, thereby delaying the processing of your financial aid award.**

Student Name: \_\_\_\_\_ GSU ID # \_\_\_\_\_ Last 4 Digits SS# \_\_\_\_\_  
Please Print Last First

Email Address: \_\_\_\_\_@student.govst.edu Name of Academic Advisor: \_\_\_\_\_

Program of Study \_\_\_\_\_

Semester Requested

Fall 2020

Spring 2021

Summer 2021

Course Code	Title of Course	Credit Hours	Course <u>Required</u> for Program Completion? (Y/N)

**CERTIFICATION STATEMENT**

By signing below I am indicating that the above approved courses are part of my program of study. I certify that all information reported on this document is true, complete, and accurate. I understand that any false statements or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

\_\_\_\_\_  
Student's Signature Date

\_\_\_\_\_  
Academic Advisor's Signature Date