FLORIDA GULF COAST UNIVERSITY

Office of Financial Aid & Scholarships
Student Financial Services

FINANCIAL AID TEACHER CERTIFICATION FORM

TO BE COMPLETED BY FGCU OFFICIAL

This is to certify that_____ UIN_____
is enrolled in the courses listed below for: (please circle one)

FALL **SPRING** **SUMMER** **YEAR___-___**

These courses are required for: (please circle one) **INITIAL K-12 CERTIFICATION** **RECERTIFICATION**

COURSE ID#	**COURSE TITLE**	**CREDIT HOURS**
_____	_____	_____
_____	_____	_____
_____	_____	_____
	Total credit hours this semester	**_____**
Total hours required for meeting professional and/or certification requirements		**_____**

_____ _____
Signature/Title of Authorized School Official Date

TO BE COMPLETED BY THE STUDENT

I understand that, with the exception of my being enrolled as a non-degree-seeking student I must adhere to all other regulations, policies and requirements, as they relate to the financial aid application process.

I understand that this is an exception to the required degree seeking status, and is not intended to cover optional courses that I elect to take for professional recognition or advancement or that the school recommends. If I already hold a Florida teaching certificate, **this exception does not cover courses required to add a certification.**

I understand that I must be enrolled at least half time (6 credits) in courses that are required for initial K-12 certification, or recertification, to teach in the state of Florida.

I understand that I must register, and provide the appropriate official with a copy of my registration, before this form can be completed.

I understand that I will be considered fifth-year undergraduate student, thus, limited to the academic year maximum Stafford Loan of $12,500 ($5,500 subsidized and $7,000 unsubsidized).

I understand that I must provide the Office of Financial Aid and Scholarships with a new Financial Aid Teacher Certification Form for **each term that I am requesting aid. Disbursements will be held until new certification is received.**

_____ _____
Student Signature Date