

] Cannot Determine

[] Cannot Determine

## STUDENT'S NAME: \_\_\_\_\_ CWID: \_\_\_\_\_

Please list any schools that you have attended in the past regardless of whether financial aid was issued at the school(s). Include the location of the school and vear(s) vou attended. If vou need additional spaces, please complete a second form.

Name of School	City, State	Academic Year(s) of Attendance

## **Certification and Signature**

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

After completing please print, sign and you can fax it to our office at (903)886-5098 or you can send as an attachment to

FAO.Verification@tamuc.edu. When received and your record is updated you can track it through your myLEO. Note: We may require additional documentation if needed.

**Student's Signature** 

Date

Yes

1 Yes

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] No

] No

For Financial Aid Office Use Only		
Financial Aid Office	Admissions Office	
Admission Office Use Only: To be completed when academic transcript(s) are received and evaluated		
Schools Attended	Were credits earned at this school?	
	[] Yes []No [] Cannot Determine	
	[] Yes [] No [] Cannot Determine	

If credits were not earned at the school(s), please indicate reason.