



Office of Financial Aid
 5717 White Bluff Road
 Savannah, GA. 31405
 Fax: 912-443-4164

**2020-2021
 Prior Degree
 Form**

Student Name: _____ Student Number: _____

When applying for financial aid you indicated that you already have a Bachelor Degree or Higher. If that was incorrect and done in error, please complete this form and submit it to the Office of Financial Aid.

Do you have a Bachelor’s Degree (4-Year), Master’s Degree, or Doctorate Degree?

Mark One { } Yes { } No

If yes, please list the degree earned and the name of the school below:

Degree Earned: _____

School: _____

I certify that all of the information reported on this form is complete and correct. Warning: If you purposely give false or misleading information on this form you may be fined, be sentenced to jail, or both.

Student Signature: _____

Date: _____

If corrections to your FAFSA are needed please allow 5-10 business days for processing

Financial Aid Office Use Only – Processed Date _____
 Document Processed By: _____