



**The Office of Financial Aid and Scholarships  
Second Degree Form 2026-2027**

**To ensure timely offering of your financial aid, return this form and all required documents within 5 days.  
Delaying the verification process will delay the offering of aid.**

Student's Name: \_\_\_\_\_ XXX \_\_\_\_\_  
*Banner ID Last 6 Digits only*

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Major: \_\_\_\_\_ Department: \_\_\_\_\_

Advisor's Name (Please print): \_\_\_\_\_

Advisor's Ext: \_\_\_\_\_ Advisor's E-Mail: \_\_\_\_\_

Undergraduate  Graduate

***In order to be considered for federal or state financial assistance, you must be maintaining satisfactory academic progress. Students cannot exceed the aggregate loan limit.***

***Academic Department use only - Please complete the section below:***

This is to advise that the student whose name is indicated above has a degree in \_\_\_\_\_  
and has been admitted in a second degree in \_\_\_\_\_.

Please **circle** the semester student began second degree program:

**Fall 2026**      **Spring 2027**      **Summer 2027**      **Other:** \_\_\_\_\_

Total hours need to complete second degree. \_\_\_\_\_

Total hours transferred or already earned toward second degree. \_\_\_\_\_

Total number of hours remaining to complete second degree. \_\_\_\_\_

***Please attach a copy of student's Plan of Action - courses needed to complete the degree(s)***

**COPY MUST BE ON DEPARTMENT LETTERHEAD**

**Example: Comp 140                      Fundamental of Computer Science                      3 hours**

\_\_\_\_\_  
Academic Advisor, Chairperson or Dean's Signature                      Date

\_\_\_\_\_  
Student Signature                      Date

**MAIL OR FAX COMPLETED FORM TO:  
NORTH CAROLINA A&T STATE UNIVERSITY  
THE OFFICE OF FINANCIAL AID AND SCHOLARSHIPS  
1601 E. MARKET STREET  
GREENSBORO, NORTH CAROLINA 27411  
TELEPHONE: 336-334-7973      FAX: 336-334-7954**