

The University Community College at Hope/Texarkana Student Data Form



Student Name: _____ SSN: _____

Address _____
 Street City State County

Phone _____ Birth Date _____ Marital Status _____
 mm/dd/year

Financial Aid Office
 P. O. Box 140
 Hope, AR 71802-0140
 870-722-8264
 Fax: 870-722-8145

2019-2020 Academic Year

In order to receive Federal and some State funds at UACCH, a student must comply with several guidelines in order to receive these funds. **Review the following and initial each statement:**

The following degrees or certificates are Title IV eligible (Federal Aid)

(CIRCLE THE DEGREE OR CERTIFICATE YOU ARE SEEKING)

Associate of Arts

◆ General Education - Transfer for all majors

◆ Criminal Justice Focus

◆ Human Services Focus

◆ Social Work

◆ Teaching

◆ UAMS Track

Associate of Science

◆ Business

Associate of Applied Science

◆ Business Administration

◆ Crime Scene Investigation

◆ Early Childhood Education

◆ Funeral Service Education

◆ General Technology

◆ Information Technology

◆ Law Enforcement Administration

◆ Medical Office Management

◆ Nursing LPN to ARNEC (must take BIOL2214 and 2224)

◆ ARNEC (MUST ALREADY BE LPN)

◆ Paramedic

◆ Power Plant Tech.

◆ Supply Chain Management

Technical Certificate

◆ Business - Accounting or Office Systems Technology

◆ CARE – Commercial & Residential Equipment Maintenance Repair

◆ Diesel Technology – Basic and Advanced

◆ Funeral Directing

◆ Heating, Ventilation, and Air Conditioning

◆ Industrial Electricity

◆ Industrial Maintenance Technology - Machine Shop or Multi-Craft

◆ Information Technology

◆ Licensed Practical Nurse

◆ Medical Office Management

◆ Power Plant Tech

◆ Power Plant Operations

◆ Welding Technology

◆ Supply Chain Management

◆ TC Health Professions

• EMS focus

• LPN Pre-Nursing focus

• Cardiac Monitor Tech.

focus

• Emergency Medical

Tech focus

_____ I understand that Federal and State financial aid is awarded at fulltime status. If I am not enrolled fulltime, this amount will be adjusted to the entitlement set by the Department of Education or Arkansas Department of Higher Education (ADHE). Fulltime status for Federal funds is 12 credit hours per semester. Fulltime status for ADHE, after the first fall semester, is 15 credit hours per semester.

_____ I understand that if I chose to take classes that are not in my degree plan that I will have to pay for these courses using my own resources.

_____ I understand that I may only receive Federal and State financial aid through one college/university at a time.

_____ I understand that if I withdrawal from classes UACCH may have to return a portion or all of my Federal funds back to the Department of Education. I understand that the amount returned could result in a balance due at UACCH.

_____ I understand that the lifetime eligibility for Federal Pell grant funds is 12 semesters. This indicates that I will have 6 years (at fulltime status) to complete my degree up to a bachelor's program. I will only be allowed to use 6 semesters (3 years) at UACCH of Federal Pell grant funds. After my 6 semesters have been used, I understand that I will not be eligible for Federal Pell grant funds thereafter.

_____ I have in no way been persuaded to pursue a degree at UACCH by the Financial Aid staff or other staff members.

_____ It is my responsibility to follow up with the Financial Aid Office to discuss financial aid ramifications if I decide to drop or withdrawal from a class.

 Student Signature

 Date

 FA Signature

TO BETTER SERVE YOU, WE ASK THAT YOU TURN IN ALL REQUESTED DOCUMENTS AT ONE TIME.