Post-Baccalaureate Course Plan



Submit to: Financial Aid and Scholarship Office Swen Parson Hall 245 DeKalb, IL 60115

NIU Student	Information:	For scanning purposes, us	se black or blue link to comp	Diete this form.		
Name				Z-ID		
Last Name	e 	First	MI			
A. To be con	npleted by Acade	emic Advisor/Advis	sing Dean:			
Student's current major/program:						
Adviso	r/Dean:		_			
Maximum Timeframe: A student is eligible for financial aid until they have attempted 150% of the minimum credit hours needed to earn a specific degree. The program length must be the shortest path to degree completion, excluding courses necessary for double majors or minors/certificates.						
NOTE: This form should be completed based on the <u>degree program</u> the student is admitted.						
for financial aid				n, the student is no long not met another gradua		
	Total Credits At	tempted prior to curi	rent degree/progran	h		
	Total Credi	its needed to comp degree/program	olete current			
	Anti	cipated Completion	Term			
B. Dean/Advis	sor Signature: (Ple	ease print this form an	d then sign.)		'	
Signature				Date		

C. To be completed by Financial Aid and Scholarship Office:

Α	Credits attempted prior to current degree/program	
В	Total Credits needed to complete current degree/program	
С	150% of current degree/program = 1.5 x (B)	
D	New Maximum Timeframe = A+C	

FA Postbacc 11/24