WEST VIRGINIA STATE UNIVERSITY

1891

Office of Student Financial Assistance

2018-2019 Academic Evaluation Form

The student must submit an academic plan completed by the Dean or Department Chair for the academic major student is currently enrolled in. The plan must show how many hours and which classes are needed to complete students currently listed degree program. Student will be able to **receive aid only** for those classes included in the academic plan.

_____ _____

Student Name Student ID #

Academic Plan

Course Name	Hours
Total Number of Hours Needed to Complete Degree Program	

(If more courses are needed then what the space allows, please write the courses and the hours on the back of this form.)

_____ _____

Student Signature Date

_____ _____

Dean or Dept. Chair Signature Date

Return to: West Virginia State University
Office of Student Financial Assistance
125 Ferrell Hall
PO Box 1000
Institute, West Virginia 25112