Student Financial Aid Satisfactory Academic Progress Maximum Time Frame Advisor Certification Form

Section I – To be completed by student:

Student's Name	:	BGSU ID:		
	Last	First		
SECTION II – To be completed by advisor, relevant to this student's situation.				
have been recor	nmended to take		olan is not completed yet, ¡	e taken and which semesters please submit a degree audit
			Student's Response	Advisors Confirmation
Total number of	Total number of credit hours earned toward degree:			
Total number of transfer credit hours earned toward degree:				
How many credits are still needed to finish degree:				
Anticipated graduation date for declared major(s):				
	To be completen formation on rea	<u>-</u>	eding maximum time fram	ne credit hours.
By signing, you indicate that the information on this form is accurate as of the date signed.				
Academic Adviso	or's Name:	(please print)	Email:	@bgsu.edu
Academic Adviso	or's Signature:		Ph:	Date:
*During the work from home period, you can submit this form electronically using our document upload feature on our website. Please do not send back to student to submit.				
DOCUMENT SUBMISSION: Please be sure to use the Guest Upload option. The student's ID and last name are required to be entered for upload. https://finaid.bgsu.edu/prd/document_submission/				