

VERIFICATION OF ACADEMIC ENGAGEMENT

Purpose

Federal student aid recipients who did not earn any credits in a given semester may complete this form to verify academic engagement, (in at least **one course**) in order to remain eligible for federal aid awarded during the semester in need of clarification.

Instructions

- Student must complete Section 1, 2 and 3
- · Submit documentation as instructed in Section 2
- Faculty member must complete Section 4 (only if box A in section 2 has been selected)
- Student must fax the completed form to the Office of Student Financial Aid Services (860)486-6629

University of Connecticut Student Financial Aid Services 233 Glenbrook Road Unit 4116 Storrs, CT 06269-4116

Fax Completed Form To: (860) 486-6629

Phone: (860) 486-2819 E-mail: financialaid@uconn.edu Website: http://financialaid.uconn.edu

SECTION 1: Student Information			
Last Name	First Name		
Student ID	Telephone Number	Cell Phone Number	
SECTION 2: Academically Related Activity			
Choose one or more items below and submit the requested documentation:			
□ A. I attended classes and engaged in an academically related activity such as class attendance or research Complete sections 1, 2, 3, 4 and 5			
□ B. I attended classes and have copies of dated, graded assignments Complete sections 1, 2, 3 and 5 and attach a graded assignment, quiz, or exam dated after October 27th			
□ C. I participated in an online discussion related to a course Complete sections 1, 2, 3 and 5 and attach documentation verifying your participation (e.g. Husky CT participation, etc.)			
□ D. I participated in an Education Abroad program Attach any of the above documentation verifying your participation and complete sections 1, 2, 3 and 5. If you are currently attending your Education Abroad program, select option "A" above and also complete section 4			
☐ E. One or more of my grades have been updated since receipt of the Academic Engagement letter Complete sections 1, 2, and 5			
SECTION 3: Indicate Course Information (for course you are providing verification information for)			
Course Name:			
Term: (Circle one): Fall / Spring / Summer	Year:		
SECTION 4: Faculty Verification of Academic Engagement			
Please check <u>one</u> of the following:			
☐ The student attended class throughout the entire semester. ☐ The student was engaged in an academic related activity (such as research) throughout the entire semester. ☐ The student ceased attendance at some point during the semester. Last known date of attendance:			
Faculty Printed Name Faculty Signat	ure Date		
SECTION 5: Certification			
I confirm that I was engaged in an academic related activity during the semester indicated.			
Student Signature Date			