

REV 02/12/2018

Office of Financial Aid 5717 White Bluff Road Savannah, GA. 31405

2018-2019 Prior Degree Form

PBAFA

Fax: 912-443-4164

Student Name:	Student Number:
•	ated that you already have a Bachelor Degree or Higher. If that was lete this form and submit it to the Office of Financial Aid.
Do you have a Bachelor's D	Degree (4-Year), Master's Degree, or Doctorate Degree?
N	Mark One { } Yes { } No
If yes, please list the o	degree earned and the name of the school below:
Degree Earned:	
School:	
•	ted on this form is complete and correct. Warning: If you purposel his form you may be fined, be sentenced to jail, or both.
Student Signature:	Date:
If corrections to your FAFSA	are needed please allow 5-10 business days for processing
	Financial Aid Office Use Only – Processed Date Document Processed By: