

"Yellow Ribbon" Scholarship Certification

Name: _____

Date: _____

Campus Wide ID: _____

You must complete and return this form to the Office of Scholarships and Financial Aid, Room 110 Marquette Hall (Campus Box 206).

- I understand that the initial amount of my award of \$14,385 from Loyola University New Orleans for the 2009-2010 academic year assumes that I will enroll as :
 - a full-time student in a day division program
 - NOTE: Awards are subject to change if you change enrollment
 - Under the Post-9/11 G.I. Bill, the Veterans Administration pays tuition benefits by the credit hour and caps the total paid annually for university fees. The amounts listed on your award letter assume a minimum of 12 enrolled hours per semester and basic university fees. These amounts will be adjusted based on your actual final charges.
- I understand that my scholarship covers a maximum of 8 semesters of full-time study towards an undergraduate degree.
- I understand that Loyola University New Orleans will publish all policies that impact the implementation of this program at <http://www.loyno.edu/financialaid/post-911-gi-bill>
- I understand that I must maintain "satisfactory academic progress" according to the guidelines published at <http://www.loyno.edu/financialaid/undergraduate-satisfactory-academic-progress-policy>.
- The Office of Scholarships and Financial Aid will review my academic records at the end of each semester to confirm my continued eligibility to participate in this program.

Student Signature _____ Date: _____

Financial Aid Signature: _____ Date: _____