Enrollment Management
Office of Student Financial Aid

The University of Toledo
New Certificate Program
Request for Federal Financial Aid

1. Certificate Program Name: _____
2. Program CIP Code (Classification of Instructional Programs): _____
3. Program Level (please circle one): Undergraduate
   Graduate /Professional

4. Program Credential Level (please circle one): 01 = Undergraduate
   04=Post Baccalaureate
   08= Graduate/Professional

5. Total Number of Weeks in Program: _____
6. Total Number of Credit Hours: _____
7. Total Number of Clock Hours (if applicable): _____
8. Contact Name (please print): _____
9. Contact Email and Phone: _____
10. Would this certificate alone prepare a student for employment in a recognized occupation?
    Yes _____ No _____

If you answered 'yes', list the Standard Occupation Code (SOC): _____
(The Department of Labor's Standard Occupational Code (SOC) must be provided to identify the occupation that the certificate program prepares the students to enter. SOC codes may be found on the Department of Labor's website (http://www.onetonline.org)

Completed by: _____
Title: _____
Department/College: _____
Date: _____

Please submit this completed form **with copies** of each applicable program's State of Ohio (ODHE) and/or Higher Learning Commission Approvals to the Office of Student Financial Aid **(MS 314)** or **email** sherri.jiannuzzi@utoledo.edu. If you are not required to obtain approval from the State or Higher Learning Commission for the program(s), please provide documentation which demonstrates that approval is not required.