FINANCIAL AID OFFICE



SELF-CERTIFICATION OF BACHELOR'S DEGREE

You have indicated on the FAFS Please complete this form to cer	SA that you have received a Bachelor's Degree tify your status.	or will be working on a degre	ee beyond a Bachelor's level
Student Name:	UH ID #/Username:		
Phone Number:	Date of Birth:		
Check the box that is applicable	to you.		
Yes, I will have a Bache	lor's Degree prior to the start of the school yea	r. Complete the information	below.
Where did you	ı receive your Bachelor's Degree(N	ame of Institution)	
Year Degree v	vas earned		
☐ No, I have not received	a Bachelor's Degree.		
Complete and sign this form, ret	urn it to your home campus Financial Aid Offic	ee at the address listed below.	
Student's Signature:		Date:	
RETURN THIS FORM ALONG WITH A	ANY OTHER REQUIRED DOCUMENTATION TO THE C	OMMUNITY COLLEGE CAMPUS T	THAT YOU WILL BE ATTENDING
Community College Hawai'i Community College Honolulu Community College Kapi'olani Community College Kaua'i Community College Leeward Community College University of Hawai'i Maui College Windward Community College	Address 200 West Kawili Street * Hilo, HI 96720 874 Dillingham Boulevard * Honolulu, HI 96817 4303 Diamond Head Road * Honolulu, HI 96816 3-1901 Kaumuali'i Highway * Lihu'e, HI 96766 96-045 Ala Ike Street * Pearl City, HI 96782 310 West Ka'ahumanu Ave * Kahului, HI 96732 45-720 Kea'ahala Road * Kāne'ohe, HI 96744	Email hawccfao@hawaii.edu honccfao@hawaii.edu kapinfo@hawaii.edu kauccfao@hawaii.edu lccfao@hawaii.edu mauifa@hawaii.edu wccfao@hawaii.edu	Phone (808) 934-2712 (808) 845-9116 (808) 734-9555 (808) 245-8360 (808) 455-0606 (808) 984-3277 (808) 235-7449