

Bachelor's Degree Verification

Student Last Name: _____ First Name: _____

Student ID: _____

Indicate the institution you attend:

Bon Secours Memorial College of Nursing (BSMCON)

Bon Secours St. Mary's Hospital School of Medical Imaging (SOMI)

Southside College of Health Sciences (SCHS)

Your FAFSA and the Financial Aid Request Form you submitted has conflicting information on whether you have received a prior bachelor's degree. Follow the instructions below to resolve this discrepancy.

Please select one:

I **have** completed my first bachelor's degree. I earned my degree on _____
(date degree was earned)

I **have not** completed my first bachelor's degree.

Student Signature: _____

Date: _____