

This cover page includes instructions about where and how to turn in your form. If you are submitting a form that contains personally identifiable information (i.e. name, student ID number, date of birth), we encourage you to **submit the completed form by mail or in person.**

BY MAIL TO:

Office of Financial Aid and Scholarships
University of Minnesota Duluth
1049 University Drive
Duluth MN 55812-3011

IN PERSON ON CAMPUS TO:

One Stop Student Services
23 Solon Campus Center

If you choose to submit the completed form by email, for your security we prefer to receive this form via your **UMD email address (xxxxxxx@d.umn.edu).**

To learn more about what might be personally identifiable information, visit studentprivacy.ed.gov.

No need to print this cover page.

GRADE LEVEL QUESTIONNAIRE

LGLVER

Directions

Please complete and sign this form certifying that the information is true.

RETURN FORM:

BY MAIL TO:

Office of Financial Aid and Scholarships
University of Minnesota Duluth
1049 University Drive
Duluth MN 55812-3011

IN PERSON ON CAMPUS TO:

One Stop Student Services
23 Solon Campus Center

QUESTIONS?

Phone: 218-726-8000
TTY (hearing impaired):
800-627-3529
Email: umdhelp@d.umn.edu

Complete this form in Adobe Reader software, not a Web browser, to ensure the privacy of your information. Place the cursor in a field and type. Print a copy to add the required signature(s) in blue or black ink.

Student information		
Last name—type or print neatly in ink	First	Middle
Student ID number	U of M e-mail @d.umn.edu	

Your answer to question #29 on the July 1, 2019–June 30, 2020 Free Application for Federal Student Aid (FAFSA) conflicts with our institutional records.

Please indicate your grade level during the 2019–2020 school year.

Check one

- | | |
|---|---|
| <input type="checkbox"/> 1st year, never attended college | <input type="checkbox"/> Already received undergraduate degree and pursuing second degree, or completing prerequisites for an undergraduate, graduate or professional program |
| <input type="checkbox"/> 1st year, attended college before | |
| <input type="checkbox"/> 2nd year, sophomore | <input type="checkbox"/> 1st year, graduate or professional |
| <input type="checkbox"/> 3rd year, junior | <input type="checkbox"/> 2nd year, graduate or professional |
| <input type="checkbox"/> 4th year, senior | <input type="checkbox"/> 3rd year, graduate or professional |
| <input type="checkbox"/> 5th year, senior or other undergraduate (check here if completing teacher certification to be licensed in Minnesota) | <input type="checkbox"/> 4th year, graduate or professional |

Certification

You must sign this form certifying that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid, whenever discovered.

Student signature	Date
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To request copies of this form in an alternative format: 218-726-8000.
UMD is an equal opportunity employer and educator.