

## 2016-2017 Classification/Level Discrepancy Form

Student First Name: \_\_\_\_\_ Student Last Name: \_\_\_\_\_ ID: \_\_\_\_\_  
DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Primary Phone #: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Secondary Phone #: (\_\_\_\_) \_\_\_\_-\_\_\_\_

### ACKNOWLEDGMENT STATEMENT

The required electronic corrections requested by The University of Texas Rio Grande Valley, might affect your Title IV eligibility. The Federal processor will email or mail you an acknowledgment as soon as the corrections are processed.

By signing this form you agree, if asked, to provide information that will verify the accuracy of the information in your Financial Aid Report. This information may include a signed copy of your Federal Income Tax Return Transcript.

In addition, you certify that you **(1)** will use federal student financial aid only to pay the cost of attending an institution of higher education, **(2)** are not in default on a federal student loan or

**(3)** have made satisfactory arrangements to repay it, and **(4)** will notify your school if you have default on a federal student loan.

If you purposely give false or misleading information, you may be fined \$10,000, sent to prison, or both.

The student and **at least one parent, (if parental information was provided on the application)**, must sign below. Unsigned forms are returned to the student and the file will remain incomplete.

#### Please select the one that best fits your situation.

- ☐ I am a graduate student. ☐ I just graduated from high school.
- ☐ I am working on my 1<sup>st</sup> Bachelor's degree ☐ I just graduated from a college/university.
- ☐ I am seeking a 2<sup>nd</sup> bachelor's degree. ☐ I am doing pre-requisite/ leveling courses

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent's Signature, if dependent)

\_\_\_\_\_  
(Date)

#### Please submit to either of the following UTRGV locations:

The Tower, Main 1.100  
One West University Blvd.  
Brownsville, Texas 78520  
Ph: (888) 882-4026  
Fax: (956) 882-8229

Visitors Center 1.113  
1201 West University Drive  
Edinburg, Texas 78539  
Ph: (888) 882-4026  
Fax: (956) 665-2392

For Office Use Only:

Processed by: \_\_\_\_\_

Date: \_\_\_\_\_