

MOORPARK • OXNARD • VENTURA
FINANCIAL AID OFFICE

CERTIFICATE NOTICE

College records indicate that you have listed a **CERTIFICATE OF ACHIEVEMENT (COA)** as your program of study. A COA requires concentrated study in specific skill or knowledge areas. The college catalog outlines the specific courses a student is required to take to complete a COA. See the college catalog of your primary college for a complete list of requirements for earning a COA.

The Financial Aid Office requires that COA students be enrolled only in classes required for completing the COA as outlined by the college catalog and the student's academic counselor.

The following action by the student is required:

1. *If you are pursuing a **COA** as your program of study, you must provide the Financial Aid Office a comprehensive Student Educational Plan (SEP) developed by an academic counselor. The SEP needs to include all classes required for completion of the COA. You must also complete and submit page 2, the **Certificate Course Approval Form**, to the Financial Aid Office every semester after you register for classes.*
2. *If you are no longer pursuing a **COA**, you must update your program of study accordingly online via your my.vcccd.edu portal. Once logged in, click on the "Financial Aid" tab. In the "Financial Aid Award Info" box, click on the "Update Program and Ed Goal" link, select the appropriate term and major, and click submit.
 - *After you have updated your program on the my.vcccd.edu portal, **you must notify the financial aid office at your primary college before the hold will be lifted from your account.****

Your financial aid is on hold until you have taken the steps outlined above to resolve this matter.

Should you need further assistance, please contact your primary college:

- Moorpark College Financial Aid 805-378-1462
- Oxnard College Financial Aid 805-986-5828
- Ventura College Financial Aid 805-289-6369



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CERTIFICATE COURSE APPROVAL FORM

STUDENT'S NAME _____

STUDENT ID # _____

A student pursuing a Certificate of Achievement is required to adhere to the approved Student Educational Plan (SEP) outlined by an academic counselor. Only courses listed on your SEP will be considered for Financial Aid. After you have met with your counselor to develop your SEP and have registered for classes each semester, submit the completed form below to the Financial Aid Office. *This form does not need to be completed by an academic counselor.*

Term: Fall 20____ Spring 20____ Summer 20____

List Courses (e.g. MATH V01) DO NOT LIST WAITLISTED COURSES	Date Course Begins

FOR FINANCIAL AID OFFICE USE ONLY	
Approved Units	Reason for Denial
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
<input type="checkbox"/> ____ units	<input type="checkbox"/> Not on approved plan <input type="checkbox"/> Exceeds repeated coursework
Total Approved Units:	<input type="checkbox"/> ____ units

I certify that I understand the Ventura Community College District's Satisfactory Academic Progress Standards. Also, I understand any deviation from these approved courses may result in an overpayment status and I may have to return the funds. I also understand that I may be suspended from further financial assistance.

STUDENT SIGNATURE _____

DATE _____

FOR OFFICE USE ONLY Comments: _____	Date: _____ By: _____
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