

## **2023-2024 Second Degree Information** Form

Please complete in blue or black ink.

Student Name:		ECU Banner ID:
	cording to ECU records you are working on a solution or department chair provide the following	second undergraduate degree. Please have your g information:
1.	Did student receive first Bachelor's degree at ECU?	
	☐ Yes ☐ No	
2.	Total number of hours required to tradition	onally earn this degree.
	Number of hours this student has remai	ning to earn this degree.
	= Number of credit(s) from student's first ustudent's second undergraduate degree.	ndergraduate degree work that will count toward
 Ac	ademic Advisor/ Department Chair Signature	 Date
Academic Advisor/ Department Chair Printed Name		
De	epartment	
 Ph	one Number	

Due to Federal Privacy Regulations regarding email and the protection of your personal information, we urge you to send documents to our secure FAX at 252-328-4347 or mail all documents to Office of Student Financial Aid, MS510, East Carolina University, Greenville, NC 27858. For materials that may contain a social security number, please cover or remove all but the last four digits. For materials with the date of birth, please cover or remove the year. If you have any questions, please contact our office at 252-328-6610.