

Dear NSU Academic Advisor,

One of your advisees, _____, SS# _____, is a TOPS Award recipient. Our office needs to know that the above named student is currently a graduating senior in his/her degree program. This information is necessary in determining eligibility for the TOPS Award.

Please fill out the information below. Once this is done, the student must return this form to our office.

Thank you for your assistance in this matter.

Sincerely,
Office of Financial Aid

For Academic Advisor Use Only:

The above student has a total of _____ credit hours remaining, as of the end of the _____ semester, to complete his/her _____ degree requirements.

His/her anticipated graduation date is _____.

Advisor's signature _____

Date _____