

Section 2: Academic Coach/Advisor Certification (To be completed by a NMHU Faculty/Academic Coach/Advisor)

NAME OF VISITING INSTITUTION: _____

ENROLLMENT PERIOD: FALL 2020____ SPRING 2021____ SUMMER 2021 _____

NMHU credit hours _____ + Visiting Institution credit hours (list course(s) below) _____ = Total credit hours: _____

Visiting Institution Course Info:

COURSE PREFIX & NUMBER	TITLE OF COURSE	CREDIT HOURS	START DATE	END DATE
EX: MGMT 300	Principles of Management	3	8/15/2019	12/15/2019

Student's Degree Program: _____

As the student's **academic coach/advisor**, I certify that the course(s) the student is enrolled in at the Visiting Institution are applicable to the degree, either as a program requirement or as general education. Further, the student has not previously earned credit for these courses, nor has the student transferred these courses to NMHU. I have confirmed with the student that his/her current degree program is accurate in NMHU's records.

NMHU **Academic Coach/ Advisor signature:** _____ **Date:** _____

Section 3: Visiting Institution Information (To be completed by the Financial Aid Office)

TUITION ONLY:	
FEES:	
TOTAL:	

Please complete this section confirming the student's enrollment in the number of credit hours listed above and the amount of tuition/fees billed at your institution.

Authorized Financial Aid Representative Signature Date

Printed Name and Title

Email

Telephone number