

Rogers State University

Office of Financial Aid

Attempted Hours Evaluation Form

Student Name: _____ ID: _____

Signature: _____ Date: _____

Please have your academic advisor complete the remainder of this form, sign and return to the Office of Financial Aid.

Degree Student is currently seeking at RSU: _____

Has student changed majors at any time while attending RSU? ☐ Yes ☐ No

· If yes, indicate number of credit hours from RSU that will be
applied toward the completion of the above degree at RSU: _____

· If no, indicate the total number of hours a student has attempted while attending
RSU: _____

If student has transferred to RSU, indicate number of credit hours from previous institutions that will be
applied toward the completion of the above degree at RSU: _____

Total: _____

Advisor Name: _____

Advisor Signature: _____ Date: _____