



2026-2027

DEGREE/COLLEGE GRADE LEVEL FORM

Questions about how to complete this form?

Call 217-786-2237 or 800-727-4161.

Text 217-786-2237.

www.llcc.edu/financial-aid

Return completed form to:

LLCC Financial Aid
5250 Shepherd Road
Springfield, IL 62703

financial.aid@llcc.edu
Electronic forms only accepted from LLCC email addresses.

217-786-2229 fax

Student information

STUDENT NAME (LAST, FIRST, MIDDLE INITIAL)

SSN OR STUDENT ID

DATE OF BIRTH

Bachelor's and master's degrees?

I do not have a bachelor's degree. I made an error on my FAFSA.

I do not have a master's or doctorate degree. I made an error on my FAFSA.

What will your college grade level be when you begin the 2026-2027 school year? (Please choose one.)

First year undergraduate (freshman)

Second year undergraduate (sophomore)

Other undergraduate (junior year and beyond)

Certification and signature

By signing this form, I certify that all the information reported on this form is complete and correct.

WARNING: If you purposely give false or misleading information on this form, you may be fined and/or sentenced to jail.

STUDENT SIGNATURE (REQUIRED – Sign printed form.)

DATE