

Petition for Financial Aid Reinstatement

To have this petition considered, complete and return this form to your College Dean's office.
Petitions should be submitted 3 weeks prior to start of term to allow sufficient time for processing.

Section A Student information

Name:		Student ID#	
VandalMail:	Phone:	Major:	
Academic program: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate		Semester GPA:	UI Cumulative GPA:
Indicate below the reasons for your suspension. Refer to the notice sent from the financial aid office.			
<input type="checkbox"/> Did not maintain minimum GPA			
<input type="checkbox"/> Did not complete 75% of all attempted classes (pace is based on completing 75% of all cumulative attempted credits)			
<input type="checkbox"/> Attempted more than 150% of credits required for the degree			

Section B Student: please explain why you were unable to meet Satisfactory Academic Progress (SAP) standards.

Be specific in describing the factors that caused the financial aid suspension. Attach supporting documents and any additional pages (if necessary to complete your statement).

Please attach a letter with your answer to Section B and Section c.

Depending on your circumstances you may be asked for additional documentation. For example:

- If a family member or significant other has died, a copy of the obituary or sign a statement.
- If you, a family member, or significant person suffered a serious illness, accident, or injury, a statement from a doctor or other professional third party, police report, or hospital bill.
- If you or your parent experienced a divorce, a letter from your attorney, parent or legal guardian.
- If you have experienced personal problems or issues with your spouse, family, or roommate, a statement from a doctor, counselor, lawyer, or other professional third party.
- If your work load was excessive, a copy of your work schedule.

Petition for Financial Aid Reinstatement

Section C Student, please explain what changes will allow you to meet standards.

Please attach a letter with your answer.

Section D Student certification

I understand that since I did not make Satisfactory Academic Progress, I have been placed on Financial Aid Suspension. I agree to use my Vandal Mail account as my primary email account and check it regularly for University correspondence.

I certify that all information provided is true and correct to the best of my knowledge. I understand that submitting this appeal is not a guarantee that my aid eligibility will be reinstated. If my financial aid is reinstated, I understand that this appeal is valid for one term, or the length of my academic plan if the requirements of the plan are met each term.

Student Signature: _____	Date: _____
--------------------------	-------------

Section E Academic College Section (Academic Plan)

For College use only: Form completed by: _____ Date completed: _____

The College **DOES** / **DOES NOT** recommend a waiver of financial aid (Check the appropriate box).

1. The College recommends reinstatement of your financial aid **for one semester** _____ (waived term) **OR**
2. The College recommends the academic plan below. The student must meet the following requirements:

Earn at least a 2.0 semester grade point average (GPA) as Undergrad (3.0 GPA Grad or 2.0 GPA for LAW) **and** meet the minimum cumulative GPA within ____ terms.

Enroll and successfully complete a minimum of _____ credits per semester and meet the minimum pace requirement of 75% (earned credits/attempted credits) within ____ terms.

Complete your degree program within ____ terms.

Other: _____

College/Department Designee: _____ Date: _____

Financial Aid Office Approval / Denial _____ Date: _____