

PETITION FOR EXCEEDING TIME FRAME

NAME (Last, First, MI)

SOCIAL SECURITY #

I am requesting Financial Aid for: [] Fall [] Spring [] Summer Year: _____

According to Satisfactory Academic Progress guidelines, you are suspended. You may appeal by completing and returning this form, along with a "Restricted Course List (RCL)", program check sheets, and academic transcripts, to the Financial Aid Office. Incomplete forms will be rejected. It is only upon approval of this petition that Financial Aid funds will be released. Written notification of the Committee decision will be mailed to you, please allow at least 15 business days (may take longer during peak processing periods). All Committee decisions are final.

PLEASE CHECK THE REASON YOU ARE FILING THIS PETITION (You must attach "Restricted Course List (RCL)," program check sheets, and academic transcripts):

[] Attempted 150% of the coursework required for my program but have not completed the program.

Why have you not earned your degree or certificate (explain in detail)?

[] Received a bachelor's degree. Why are you seeking a new degree (explain in detail)?

[] Changing the current RCL I have on file (attach a new RCL). What is the reason for revision or change to your current RCL?

Student Signature

Date

THIS SECTION - OFFICE USE ONLY

Date _____ Committee initials _____ Effect: Fall/ _____ Spring/ _____ Sum/ _____

Approved _____ Disapproved _____ #Cr. attempt _____ #Cr. earned _____ GPA _____ SAP code _____

Approved with [] _____

Stipulations: [] _____

Comments: _____

Your signature below acknowledges that you have READ & UNDERSTAND the restrictions within these documents.

Acknowledgement _____ Date: _____