



REVIEW OF UNDERGRADUATE EDUCATIONAL  
PLAN FOR STUDENT FINANCIAL AID

Office of Financial Aid and Scholarships

P.O. Box 3011 Commerce, Texas Phone: 903.886.5096 Fax: 903.886.5098

[FAO.Appeals@tamuc.edu](mailto:FAO.Appeals@tamuc.edu)

STUDENT NAME

CWID

Instructions to student: Please check the semester you are appealing.

	<b>SUMMER 2016</b>	<b>FALL 2016</b>	<b>SPRING 2017</b>	<b>SUMMER 2017</b>
<i>Appeal Deadline</i>	<i>May 23, 2016</i>	<i>August 22, 2016</i>	<i>January 6, 2017</i>	<i>May 22, 2017</i>

Student Signature

Date

**To the Advising Center/Academic Advisor:**

Students must meet minimum requirements to continue receiving financial aid.

All students must complete a minimum number of hours based on attempted hours at the start of the semester.

All students must complete the semester with a minimum GPA based on their class level.

**Undergraduate Students:**

With 30 hours or less must have an end of term and institutional cumulative GPA of 1.8 or higher

With 31 hours or more must have an end of term and institutional cumulative GPA of 2.0 or higher

Attempting 5 hours or less must complete all credit hours attempted.

Attempting 6 to 11 hours must complete no less than 6 credit hours attempted

Attempting 12 to 13 hours must complete no less than 9 credit hours.

Attempting 14 hours or more must complete 67% of all hours attempted.

Have up to 150% of number of credit hours required for graduation in their program of study

This student did not meet the SAP requirements for the semester identified. This is the second time and the student needs to be placed on an educational plan that will result in successfully meeting the minimum financial aid standards of progress outlined above.. Please review the student's academic history and based on that review please complete the following:

**This section is to be completed by a representative of the advising center/academic advisor:**

Student's Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Is the student making reasonable progress towards completing his/her degree? \_\_\_\_\_

Has an educational plan been established for this student?

NO. The educational plan is outlined on the back of this form.

If an educational plan had previously been completed for this student, please review the academic history and advice to the status of the student's progress towards completion of the degree.

YES. Student met the educational plan and is making progress towards completion of the degree. The student is no longer required to be on an educational plan.

NO. Student has not met the educational plan agreement and will not be able to fulfill that agreement on the designated timeline.

Advising Center Representative's Name (Please Print)

College

Representative's Telephone

Representative's Email

Representative's Signature

Date

**UNDERGRADUATE EDUCATIONAL PLAN FOR STUDENT FINANCIAL AID**

**Instructions to student:**

As a condition of the approval of your financial aid suspension appeal request, you are required to follow the educational plan outlined below by a representative of the Academic Advising Center / Academic Advisor. Your progress will be monitored at the end of the semester(s). Failure to follow or meet the educational plan will result in cancellation of this educational plan and future financial aid will not be available.

\_\_\_\_\_  
**STUDENT NAME**

\_\_\_\_\_  
**CWID**

\_\_\_\_\_  
**This section is to be completed by a representative of the Advising Center/Academic Advisor**

Based on the review of this student's academic history, the recommendation is for this student to adhere to the following conditions.

**End of Semester minimum GPA Requirement**

[ ] This student needs only to complete the \_\_\_\_\_ semester with the minimum end of semester GPA for the class level.

**Institutional cumulative GPA Requirement**

[ ] The student will need more than 1 semester to achieve the minimum institutional cumulative GPA as required for the class level. The student will need \_\_\_\_\_ semester(s) in order to achieve the minimum institutional cumulative requirements. The end of the semester(s) GPA is outlined below:

Semester 1: Minimum end of semester GPA must be \_\_\_\_\_ Semester 2: Minimum end of semester GPA must be \_\_\_\_\_

If more than 2 semesters are needed to reach the minimum institutional cumulative GPA, please indicate below what is the requirement for this student.

\_\_\_\_\_  
\_\_\_\_\_

**Attempted hours vs completion hours within a semester/term of enrollment**

[ ] Based on the academic history for this student, it is recommended the student register in no more than \_\_\_\_\_ credit hours for the \_\_\_\_\_ semester.

As the representative of the College of \_\_\_\_\_ Advising Center, the above conditions have been explained to the student.

Advising Center Representative's Name (Please Print) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
**Student's Acknowledgement and Acceptance of the educational plan outlined.**

I understand I am expected to:

1. Follow the guidelines outlined above as condition of the approval of my financial aid appeal.
2. Notify the Academic Advising Center representative and the Office of Financial Aid & Scholarships if at any point in time during the semester I am not able to continue meeting the conditions outlined above.

I understand that **failure to not meet the guidelines outlined above will result in suspension of future financial aid.**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_