PLEASE RETURN THIS FORM TO YOUR FINANCIAL AID COUNSELOR IMMEDIATELY

_____ _____
Student's Name **ID #**

_____ _____
Email Address **Cell #**

APPEAL OF "NO AID STATUS"

Satisfactory academic progress is:

Full-Time Students: Both quarter and cumulative GPA must be a minimum of 2.00, must register for full-time class work (12-17 qtr. hours), and complete at least 10 hours of class work.

Part-Time Students: Both quarter and cumulative GPA must be a minimum of 2.00:

¾ Time = 9-11 hours; complete 9 hours

½ Time = 6-08 hours, complete 6 hours

Your evaluation of your unsatisfactory performance: (Use reverse side of this page for more space).

_____
_____
_____
_____
_____

Plan with your academic advisor a class load that you can successfully complete which may not include any repeat classes. ** Submitting this to Student Finance does not complete your registration! **

Course#	Course Name	Credit Hours	Instructor

Total Quarter Hours _____

I hereby certify to the best of my understanding that the above-named student can meet the GPA requirements listed and successfully complete the courses shown during the next quarter.

Advisor's Comment: _____
_____

_____ _____ _____ _____
TLC Signature **Date** **Advisor's Signature** **Date**

This section must be completed and signed by the Registrar if the PUC CUM GPA is less than 2.0

CURRENT PUC CUMULATIVE GPA: _____ **TOTAL CUM HOURS:** _____

GPA needed to achieve 2.0 CUM GPA based on student's proposed total hours listed above: _____

_____ _____
Registrar's Signature **Date**

FOR OFFICE USE ONLY

Approved _____ _____ _____ _____

Disapproved _____ _____ _____ _____

Comments: _____