

**PLEASE RETURN THIS FORM  
TO YOUR FINANCIAL AID  
COUNSELOR IMMEDIATELY!**

\_\_\_\_\_  
STUDENT'S NAME ID#  
\_\_\_\_\_  
EMAIL ADDRESS CELL #

**PETITION FOR REINSTATEMENT OF FINANCIAL AID**

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 hrs; complete 9 hours.

½ Time = 6-08 hrs; complete 6 hours.

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

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

How you plan to remedy the condition(s) that caused unsatisfactory academic progress:

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

Plan with your academic advisor a class load that you can successfully complete. You may not include any repeat courses. **\*\* SUBMITTING THIS FORM TO STUDENT FINANCE DOES NOT COMPLETE YOUR REGISTRATION! \*\***

Course #	Course Name	Credit Hours	Instructor

TOTAL QUARTER HOURS: \_\_\_\_\_

I RECOMMEND THIS CLASS LOAD FOR THIS STUDENT AND BELIEVE THE CLASSES CAN BE COMPLETED SUCCESSFULLY.

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

TLC Signature \_\_\_\_\_ Date \_\_\_\_\_

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

Current 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**

Approve \_\_\_\_\_

Disapprove \_\_\_\_\_

Comments: \_\_\_\_\_