Academic Plan for Financial Aid

Name: ___________________________________  UCF ID/ PID: __________________  Phone: __________________

Major: _______________________________  Expected Graduation Date (mm/yyyy): __________________

Total UCF GPA & Hours: ________________  Total Cumulative GPA & Hours: ________________________

This student is currently not eligible for financial aid for one or more of the reasons listed below. We are requesting your assistance in assessing the student’s academic record. Please develop the Academic Plan in consultation with the student. Be as specific as possible, and include any required or restricted courses and any restrictions on full-time enrollment.

☐ Student’s Cumulative GPA less than 2.0 for Undergraduate or 3.0 for Graduate

1. Provide a plan of work (courses and course load) in which the student is advised to enroll in order to raise cumulative GPA to proper level.
2. Please include in the comments section (if appropriate) the grades and/or length of time it will require for the GPA to proper level.

☐ Student did not Successfully Complete 70% of Attempted Hours

Outline courses and/or course load in which the student is advised to enroll that will allow him/her to successfully complete at least 70% of his/her course load.

☐ Student Exceeded the Maximum Number of Attempted Hours (180 hours undergraduate) for Degree Completion. Please see SAP policy at www.finaid.ucf.edu/receiving/sap.html for the maximum number of undergraduate and graduate hours.

1. Provide a plan of work (courses and/or course load) in which the student is required to enroll that will successfully progress him/her toward completion of his/her program.
2. Include the length of time it will take for the student to complete his/her program.

Please check the reason/s student exceeded the 180 maximum attempted credit hours:
__Change of Major  __Repetitive Coursework  __Excessive Transfer Credits  __Seeking additional degree.
__Completion of Major/s  __Seeking Minor/s  __Completion of Certificate/s  Please explain in comments section

Has the student had a major change? ___ Yes ___ No

If student has had a major change, how many credits from the student’s first declared major are not counting towards the student’s current major? _____

☐ Student did not meet financial aid probation

1. Provide a plan of work (courses and/or course load) in which the student is required to enroll that will successfully progress him/her toward completion of his/her program. If this is a Graduate Certificate student, only include required courses toward the certificate program.
2. Please comment in regards to details SFA should know in regards to student’s situation.

Academic History:
(1) Has the student completed all required courses for a bachelor’s/master’s/doctoral degree or Certificate? ___Yes ___No
(2) Was the student admitted to UCF as a transfer? If yes, how many of the transfer hours were applied to the degree that the student is working towards? __________  __________  Student was not admitted to UCF as a transfer student
(3) If student has declared minor, is it required for the degree? ___Yes ___No  ____Student has not declared a minor.
(4) Remaining credit hours needed to complete degree or certificate program requirements (including current term): __________
(5) Timeframe for degree completion (expected graduation): __________
(6) Is the student seeking a double major? __________  If yes, please complete a separate Academic Plan for each major.

Comments/ Recommendations (attach additional sheets if necessary):
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Signature (Academic Advisor/Department Head/Dean): ______________________________________________________________
Print Name: ___________________________________  Title/Department: _________________________________________
Phone number: _______________________________  Email: __________________________________________________________
Academic Plan for Financial Aid (Part 2)

Plan of course work to raise GPA, increase course completion ration to 70%, and/or meet completion requirements. Courses must be required for completion of student’s degree. **List Minor courses only if required for major.**

Start with current term.

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<th>Required?</th>
<th>credit hours per class</th>
<th>Term</th>
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I, _____________________________________________ attest that all information provided is true and complete, and I agree to and understand that I must abide by the Academic Plan (Part 1 & Part 2) set up by my academic advisor. I also understand that if I do not abide by the plan, I will lose eligibility for financial aid.

Student’s Signature: _________________________________________ Date: ______________

☐ I certify that I have spoken with the student in regards to his/her Academic Plan and provided the student with access to a copy of the completed plan.

Signature (Academic Advisor/Department Head/Dean): ____________________________________________

Print Name: ____________________________ Title/Department: ____________________________

Phone number: ____________________________ Email: ____________________________