



FLORIDA STUDENT ASSISTANCE GRANT RENEWAL APPEAL FORM

Last Name _____	First Name _____
E-mail _____	UCFID _____
Daytime Phone # _____	

This form is for students who:

- 1) Received an FSAG award at UCF during 2018-19 and failed to meet renewal criteria, such a completing the required hours and/or minimum GPA, at the end of Spring 2019.
- 2) Not eligible for FSAG due exceeding 132 attempted hours.

Please indicate which situation listed below pertains to this request for re-evaluation:

- Late Grades Posted / Study Abroad / Grade Change: Course(s) _____ Term: _____
- Hours taken at another institution: _____ Fall 2018____ Spring 2019____
Name of Institution
- No longer eligible for FSAG due to exceeding 132 attempted hours, but is enrolled in a degree program that requires more than 120 hours. ****Please note: Excess in attempted hours due to a change in major or multiple degrees does not qualify the student for additional hours of eligibility.**
Degree Program: _____
- Appeal: Medical Emergency

If you are requesting an appeal, you must include the following:

1. Your letter describing the circumstance and its impact on your academic performance.
2. Documentation that supports your appeal such as medical documentation, divorce decree, death certificate, letters from doctors, counselors, parents, etc.

NOTE: This appeal will not be reviewed by the committee if the above items are not attached to this form.

Student's Signature: _____ **Date** _____

<u>OFFICE USE ONLY</u>	UCF	Transient	Total		
Summer 2018:				Committee Decision Date: _____	
Fall 2018:				Approved: <input type="checkbox"/> Denied: <input type="checkbox"/> Tabled: <input type="checkbox"/>	
Spring 2019:				Comments:	
Total hours:				_____	
Overall GPA at the end of Spring:				_____	

Checklist: Communication Sent: Review User Edit:

Award: Report to the State:

Decision sent to State (if applicable):