

# RIT | Office of Financial Aid and Scholarships

56 Lomb Memorial Drive • Rochester, New York 14623  
(585) 475-2186  
RITAid@RIT.edu

## REQUEST FOR FEDERAL FINANCIAL AID PROBATION

Student Name \_\_\_\_\_ University ID \_\_\_\_\_  
Day Phone Number (\_\_\_\_\_) \_\_\_\_\_ Best time to reach you at this number \_\_\_\_\_

This form provides you the opportunity to appeal the loss of Federal aid eligibility for failure to make Federal Satisfactory Academic Progress (SAP) due to unusual circumstances. If your request is approved you will be granted *Financial Aid Probation*. If your request is denied, you will not be eligible to receive federal financial aid until you regain SAP.

**PLEASE DO NOT SUBMIT THIS FORM UNLESS YOU WISH TO RECEIVE FEDERAL FINANCIAL AID (i.e. Pell Grant, SEOG, Direct Loans, PLUS Loans, or Work-Study) Graduate students are limited to Direct Loans and Graduate PLUS loans only.**

There is a limit to the maximum number of times to receive federal financial aid probation:

- Baccalaureate* – Maximum of two times, each lasting no longer than three consecutive semesters.
- Associate* – One time only, lasting no longer than two semesters.
- Graduate* – One time only, lasting no longer than two semesters.
- Certificate* – One time only, lasting no longer than one semester.

Your appeal must include the following:

1. The reason(s) why you were unable to attain Federal Satisfactory Academic Progress. Examples include death or illness of an immediate family member, difficulties in a program of study requiring you to change your major, personal/emotional difficulties, or you had a serious illness. If your reason includes a serious illness, you must provide proof such as a doctor's note, hospital record, etc. Medical reasons may be evaluated by the RIT Student Health Center to determine if the medical reason warrants consideration.
2. What steps you will take in order to regain Federal SAP.
3. You **MUST** submit a **Federal SAP Action Plan form**. This plan will show what you will academically accomplish each semester to regain Federal SAP. You must meet or exceed the goals outlined in the plan in order to continue to receive federal financial aid. **Contact the appropriate individual within your primary academic unit to arrange an appointment for the creation of your Federal SAP Action Plan.**

Your request cannot be reviewed until we have this document, your Federal SAP Action Plan from the responsible individual within your primary academic unit (i.e. academic advisor), and any supporting documentation. Your Federal SAP Action Plan **MUST** accompany this Financial Aid Probation request. **Both your Financial Aid Probation and Federal SAP Action Plan must be received no later than 7 weeks from the start of the next semester you are requesting federal aid (the deadline is no later than 3 weeks if your next semester is a summer session).** Otherwise, any federal aid awarded will be rescinded for the semester(s) you are not making SAP. **No exceptions will be allowed.**

Failure to follow these guidelines will result in automatic denial and thus the loss of federal aid eligibility.

*Please complete all the sections on the following page and you **MUST** attach an Action Plan from the designated individual within your primary academic unit.*

**Student Name** \_\_\_\_\_ **University ID** \_\_\_\_\_

**Section A:** Please describe why you were unable to attain Federal Satisfactory Academic Progress (attach additional paper if necessary).

**Section B:** Please provide an explanation on the steps you will take to regain SAP (attach additional paper if necessary).

**Section C: STATEMENT OF CERTIFICATION**

I have reviewed the RIT Federal Satisfactory Academic Progress policies. The information provided on this form is true and accurate. I understand if approved for Financial Aid Probation if I do not meet the minimal requirements of the Action Plan or it is determined that I cannot regain Federal SAP by the end of my approved Federal Financial Aid Probation period, I will lose federal aid eligibility until I meet federal SAP requirements. I recognize I may request Federal Financial Aid Probation in the future as long as I meet guidelines to re-apply.

**Section D: SIGNATURE**

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**Student**

**Date**

Please upload this completed form to [www.rit.edu/aid/upload](http://www.rit.edu/aid/upload) or mail to our office.

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.