

Academic and Transfer Scholarship Exception/Hold Request For Awards First Made Fall 2014 and After



Student Legal Name: _____ Student ID: _____

Email Address: _____ Phone Number: _____

Address: _____

Instructions:

1. Complete the information below.
2. Provide a short type written statement regarding the request.
3. Attach the appropriate requested documentation substantiating the reason for the request.
4. Mail, E-mail, or Fax to the Office of Student Financial Aid at the address below. (Electronic signatures not accepted.)

Please check the box(es) which reflects what you are requesting:

- Exception to Grade Point Average (GPA) Requirement
- Exception to Hours Requirement
- I would like to place a hold on my scholarship for ___ Semesters.
- Exception to academic scholarship deadline(s).**

Please check the box which reflects the mitigating circumstance that exists/existed:

- Medical**-Documentation must include medical records and a signed letter from a licensed medical professional indicating the nature of the condition and the timeframe in which the condition has or will impact the ability to complete the academic work.
- Military**-Documentation must include a copy of military orders.
- Religious/Humanitarian**-Documentation must include a letter of acceptance into the program and a letter from a religious leader or director of humanitarian project on official letterhead.
- Educational**-Documentation must include two letters from UCA full-time faculty members (from the department of the student's course of study) on how this will enhance the student's education in their selected course of study. **For first-time undergraduate, documentation must include a letter from the program and a letter from one or more of the following: recommending sponsor, mentor, High School counselor/faculty.**
- Graduation Hour**-Documentation must include the receipt of payment to UCA for graduation or letter from advisor explaining individual circumstances.
- Incomplete Grade**-Documentation must include a letter or email from the course instructor including the reason for the incomplete grade and the time frame of when the grade will be completed.
- Transcript**-Documentation must include a statement from the high school counselor or transfer institutions registrar's office stating when the transcript was requested and transmitted.

PLEASE READ CAREFULLY: By signing this Exception/Hold Request, you acknowledge that you have read all policies and procedures regarding this request and your scholarship. You also acknowledge that you understand the University's Scholarship Compliance Committee will not review an incomplete exception/hold.

Student Signature: _____ Date: _____

The University's Scholarship Compliance Committee will review and evaluate the request and documentation and will make a decision based on institutional policy. The student will be notified in writing when a decision has been made.

Office Use Only		
Action Taken: _____	Date: _____	Signature: _____