Academic and Transfer Scholarship Exception Request Form

UNIVERSITY OF CENTRAL ARKANSAS

Student Legal Name: _____ Student ID: _____

Email Address: _____ Phone Number: _____

Address: _____

Instructions:

1. Review the Scholarship Exception Policy located at http://uca.edu/scholarships/policies/.
2. Complete the information below.
3. Student must provide a short type-written statement regarding the request.
4. Attach the appropriate documentation substantiating the reason for the request.
5. Return all required documents to the Office of Student Financial Aid at the address below. (No electronic signatures)

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

- ☐ Exception to Grade Point Average (GPA) Requirement
- ☐ Exception to Hours Requirement
- ☐ 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/or a signed letter from a licensed medical professional explaining at a minimum why the student's coursework was affected and the location and date(s) of treatment.
- ☐ Military-Documentation must include a copy of military orders.
- ☐ Graduation Hour-For conflicts with class offering times in the student's final year, documentation must include a letter from the student's advisor explaining the individual circumstances.
- ☐ Religious/Humanitarian-Documentation must include a letter verifying participation in the program from the religious leader or director of humanitarian project on official letterhead.
- ☐ Educational-Documentation must a letter from a UCA faculty member (from the department of the student's course of study) on how this specific experience enhanced the student's education in their course of study.
- ☐ Incomplete Grade–Documentation must include a letter or email from the UCA faculty member who assigned the grade stating the reason for the incomplete grade and 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.
- ☐ Valedictorian/Salutatorian (Exception to academic scholarship deadline only) - Documentation must include evidence of selection as valedictorian (including co-valedictorian) or salutatorian of the student's high school graduating class.

Note: Graduation Hour Exception – Students who are not enrolled in the required number of hours for the academic scholarship due to graduation are not required to request an exception. Please review the Scholarship Exception Policy at http://uca.edu/scholarships/policies/ to confirm that you meet the requirements for disbursement of your scholarship in your graduating semester.

PLEASE READ CAREFULLY: By signing below, 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 Committee will not review incomplete exception requests.

Student Signature: _____ Date: _____

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

FINANCIAL AID REVIEW	COMPLIANCE REVIEW
Approve Deny Date: _____ Signature: _____	Approve Deny Date: _____ Signature: _____
SCHOLARSHIP COMMITTEE ACTION (if needed)	OFFICE OF STUDENT FINANCIAL AID
Approve Deny Date: _____ Signature: _____	_____ RRAAREQ Updated _____ RHACOMM Note Signature: _____ Date: _____

Office of Student Financial Aid
Harrin Hall 200 | 201 Donaghey Avenue | Conway, AR 72035
501-450-3140 | FAX 501-450-5159 | finaid@uca.edu |uca.edu/financialaid

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