Financial Aid Extension Request



MAXIMUM TIMEFRAME/GONZAGA GUARANTEE

Gonzaga is committed to supporting you as you complete your degree. However, there are policies and regulations that limit the amount of aid you can receive. The purpose of this process is to help us understand your educational goals. We will use the information you provide to determine your future aid eligibility. Our goal is to provide information about your financial aid options as you work towards graduation.

Use this form if you will not finish your undergraduate coursework within four years or two years for transfer students.

RELEVANT POLICIES:

- **Satisfactory Academic Progress**
- Gonzaga Guarantee

INST

NSTRUCTIONS
\square Apply for Graduation either on <u>ZagWeb</u> or in the Registrar's Office (CG229)
☐ Using the Degree Evaluation Report on <u>ZagWeb</u> , develop an Academic Plan for your remaining semesters at Gonzaga. There is an online tutorial available at www.academicservices.gonzaga.edu. Submit your Degree Evaluation and Academic Plan with this form (either printed or screenshot acceptable).
☐ Use the <u>Academic Planning Guide</u> (attached page 3 of 3) to develop an academic plan for your remaining semesters at Gonzaga.
\Box Provide an "explanation of circumstances" in the space on the 2 nd page of this form. Attach a separate piece of paper if necessary. The explanation should address the reasons you are unable to complete your degree.
Mitigating circumstances may include the following:
 Change of major Transfer to Gonzaga Nine semester Nursing Program Teacher Certification Combination of major for employability Schedule conflicts or Medical conflict or ADA requirement or Other unusual circumstances
\Box Schedule an appointment with your advisor. You must meet with your advisor and secure his/her signature on the 2^{nd} page of this form to have your request considered. Be sure to bring your prepared Degree Evaluation and Academic Plan and copy of your completed extension form to the appointment.
□ Submit all extension request documents to Student Financial Services Office – Crosby 001 or via email at iinaid@gonzaga.edu . Required documents: □ Signed and completed extension form
 □ Copy of Degree Evaluation (print out or screen shot acceptable) □ Academic Plan (page 3 of 3)

Updated 4/2019





STUDENT INFORMATION				
Student Name:			ID:	
Academic Major(s):		Minor(s):		
Anticipated Graduation Date (mm/yy):	Advisor:			
Copy of Degree Evaluation attached (Provide a brief description of why you a necessary:			ıl aid; use a separa	te page if
ADVISOR COMMENTS				
Advisor Signature		Dat	ee	
I certify that all information and document	ation I have su	ubmitted pertaining to this exter	nsion request is acc	urate and true.
Student Signature		Dat	re	

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ACADEMIC PLANNING GRID

Start with your current semester that you are enrolled in and continue with semesters you will be requesting an extension for.

Current Semester ☐ Fall ☐ Spring ☐ Summer Year	☐ Fall ☐ Spring ☐ Summer Year
☐ Fall ☐ Spring ☐ Summer Year	☐ Fall ☐ Spring ☐ Summer Year
☐ Fall ☐ Spring ☐ Summer Year	☐ Fall ☐ Spring ☐ Summer Year
☐ Fall ☐ Spring ☐ Summer Year	☐ Fall ☐ Spring ☐ Summer Year