



Maximum Time Frame Appeal

Please fill in the spaces below:

Student Name: _____ Social Security Number: _____
 Student's ID Number: _____ Email: _____

Maximum Time Frame

According to the SAP policy, students must complete their academic program within a specified maximum time frame as required by their chosen program of study. Financial aid eligibility is limited to accumulated attempted hours totaling no more than 150% of the credit hours required to receive a first undergraduate degree (i.e., 120 hours required \times 1.5 = 180 maximum allowable hours attempted for financial aid eligibility). Every semester in which you are enrolled in school will be

If you have reached **Maximum Time Frame** for your degree of study, you are no longer eligible to receive financial aid. This form will allow you appeal the SAP policy for an extension of your financial aid eligibility, in order to complete your degree. This appeal is subject to approval by the Director of Financial Aid. Follow the 4 steps listed below and submit both pages of this appeal and the accompanying documentation to the financial aid office for review.

Step 1 of 4 – Academic Standing

Program of Study: _____

Date Enrolled As Such: _____

If this is a Selective Admission Program, have you been accepted?

Total # of Credits Earned: _____

Total # of Credits Attempted: _____

Total # of Credits Remaining: _____

Total # of Semesters Remaining: _____

Step 2 of 4 – Letter of Appeal

Provide a legible letter of appeal which addresses both of the following: (a) why you have been unable to complete your program within the maximum number of credits allowed AND (b) your current program of study and career goal(s).

Step 3 of 4-Enrollment Intentions

Complete the table on page 2 indicating your enrollment plans for completing your educational goal. For assistance in completing the table, visit the records office for an unofficial transcript, consult your academic advisor for a degree audit, or look up your degree curriculum in the online course catalog (<http://www.rio.edu/catalog/index.php>)

Step 4 of 4 – Acknowledgement of terms and conditions of a granted appeal

I understand that if I am granted an appeal for reinstatement of my financial aid, I must maintain a minimum overall 2.0 GPA, complete 100% of the courses attempted each semester on time to retain eligibility (incompletes will not be accepted), and understand only those courses required for completion will be financial aid eligible.

Student Signature: _____ Date: _____

**University of Rio
Grande/Rio Grande
Community College**

PO Box 500
Rio Grande, OH 45674-0500

Financial Aid Office
Phone: 740-245-7218
Fax: 740-245-7102

Email: finaid@rio.edu

**UNIVERSITY OF
RIO
GRANDE**
AND RIO GRANDE COMMUNITY COLLEGE

Visit: www.rio.edu for
more information

2025-2026

University of Rio Grande
Office of Financial Aid



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Please fill in the spaces below:

Please list all of the courses needed to complete your program and the respective credit hours broken down by the semester the courses will be taken.

Semester: _____	20 _____ (year)	Semester: _____	20 _____ (year)
Course Number:	Credit hours	Course Number:	Credit hours
<i>Example: MTH 10103</i>	4 hours	<i>Example: MTH 10103</i>	4 hours
Semester: _____	20 _____ (year)	Semester: _____	20 _____ (year)
Course Number:	Credit hours	Course Number:	Credit hours
<i>Example: MTH 10103</i>	4 hours	<i>Example: MTH 10103</i>	4 hours
Semester: _____	20 _____ (year)	Semester: _____	20 _____ (year)
Course Number:	Credit hours	Course Number:	Credit hours
<i>Example: MTH 10103</i>	4 hours	<i>Example: MTH 10103</i>	4 hours

OFFICE USE ONLY

Maximum Time Frame Approval:

Approved
 Denied

Comments: _____

Director of Financial Aid Signature: _____

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