

# The New York Institute of Technology

## Office of Financial Aid

### Satisfactory Academic Progress Academic Plan

This form MUST be completed by the Academic Designee. If it is determined that a student who is not making Satisfactory Academic Progress cannot mathematically become eligible for financial aid within one term, an Academic Plan must be formulated. This form will delineate what courses and grades are expected for the next TWO terms to ensure that the student will regain financial aid eligibility.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID#

\_\_\_\_\_  
Academic Level

\_\_\_\_\_  
Major

\_\_\_\_\_  
Expected Date of Graduation

The objective of the Academic Plan is to determine the student's ability to meet the required standards of progress as outlined in the college's policy governing satisfactory academic progress. Paramount to this assessment is the student's ability to complete his/her academic program within the maximum allowable timeframe (total **attempted** credits cannot exceed 150% of the number of credits in the program) with the minimum CGPA required for graduation. In order for an appeal to be granted, it must be mathematically possible for a student to achieve the minimum progress standards within the one term of probation or the student must meet all requirements as set forth in the Academic Plan, which covers the next two terms.

Semester and Year:	
Course	Credits
<b>Total Credits:</b>	
<b>GPA Required:</b>	

Semester and Year:	
Course	Credits
<b>Total Credits:</b>	
<b>GPA Required:</b>	

**Certification:**

*I certify that I have met with my Academic Designee to develop an Academic Plan designed to assist me with meeting the college's standards for satisfactory academic progress within two terms. I understand that in order to continue receiving federal and institutional financial aid, I must be meeting the requirements of this Academic Plan. I further understand that if I fail to meet the terms of this plan, my financial aid **will** be suspended in the subsequent term and I will have to regain financial aid eligibility at my own expense.*

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
Academic Designee Name (please print)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Academic Designee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date