2023–2024 Request For Additional Terms of Institutional Financial Aid

At Drexel, students receive institutional awards for a maximum of 12 academic terms provided they are enrolled full-time with a cumulative GPA of 2.0. Students who are required to enroll for more than 12 full-time academic terms in order to complete their undergraduate degree can use this form to request additional terms of their institutional awards. Additional terms of institutional aid will only be considered when students are in their final year of enrollment.

Completing the Financial Aid Appeal Request

Students must submit the form below to request additional terms of institutional financial aid. Please note that this request cannot be used for athletic scholarships. For any questions regarding your athletic scholarship, contact the Athletics Department.

Student Name________________________________________          University ID_________________________
Anticipated Graduation Date______________________
Enter number of additional terms needed:_______ number of class terms you will need to complete your degree.

Select the option(s) that best describes why you were unable to complete your degree within 12 terms:

☐ Leave of Absence during one or more class terms
☐ Withdrawal/Failure of Course(s)
☐ Changed Major
☐ Added Major/Minor
☐ Other

Please explain the reason for your request in the space below:
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
Availability of courses for my major:________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
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By signing below, I certify that all of the information reported is complete and correct. I understand that the Office of Financial Aid will make a final and binding determination regarding my appeal.

Signature_________________________________      Date __________________

(Original Signature Required)