



MADISON COLLEGE FINANCIAL AID

Eligibility Reinstatement - After Academic Improvement

Your eligibility for Federal student aid is currently terminated. In order to have your eligibility for Federal student aid reinstated, you must complete the Academic Improvement process.

INSTRUCTIONS - To request reinstatement after academic improvement, you must complete all sections of this form, sign, and submit it to the Financial Aid Office for review.

STUDENT INFORMATION

Last Name _____ First Name _____ Student ID _____

CRITERIA REQUIRED TO COMPLETE THIS FORM

You must be able to answer yes to the following criteria in order to in order to qualify for the Reinstatement After Academic Improvement program.

1. Have you completed at least 6 credits within one semester without financial aid at Madison College? Yes No
2. Have you completed all courses (there cannot be any grades of W, F, or I)? Yes No
3. Have you achieved a semester GPA of at least 2.0? Yes No

SELF EVALUATION

Past	Present	Issues
<input type="checkbox"/>	<input type="checkbox"/>	Too many courses
<input type="checkbox"/>	<input type="checkbox"/>	Illness in family
<input type="checkbox"/>	<input type="checkbox"/>	Death in family
<input type="checkbox"/>	<input type="checkbox"/>	Illness of self
<input type="checkbox"/>	<input type="checkbox"/>	Employer required schedule changes

Work Load Per Week:

- 40 + Hours 20-30 Hours 10 Hours or Less
 30-40 Hours 10-20 Hours Not Working

Academic Load:

- Full Time (12+ credits) Half Time (6-8 credits)
 Three Quarters (9-11 credits) Less Than Half (1-5 credits)

Financial aid can only pay for classes that fulfill outstanding requirements for graduation in your current program of study.

BRIEF EXPLANATION *(Attach a separate, typed, signed document if space is not sufficient.)*

Provide an explanation of the circumstances surrounding your financial aid suspension.

Provide an explanation of how the situation has changed and how you are now able to return to school and be successful.

SIGNATURE

By signing, I agree that the information provided above and any attachments are true and accurate. I take full responsibility to pay for all education-related expenses, and am prepared to pay from my own resources pending the outcome of this reinstatement request. I am aware that additional steps may be required upon review of my request.

Student Signature _____ Date _____

Electronic signatures are not accepted.

SUBMISSION INSTRUCTIONS

Please sign and submit your completed form in **one** of the following ways:

- Email: financialaid@madisoncollege.edu
- Mail: Madison College Financial Aid, 1701 Wright Street, Madison, WI 53704
- Fax: (608) 243-4245
- In Person: At the Truax Enrollment Center or at any Regional or Metro campus