

TEXAS GRANT HARDSHIP APPEAL 2025-2026

Student Last Name	First Name	Middle Initial	UTEP ID Number
Student Primary Phone		Student Email Address	Student Date of Birth
A student who is ineligible for a TEXAS total hours enrolled may be deemed e			verage (GPA), number of completed hours, or
			ent of the student's TEXAS Grant award based ment that answers the following questions, and
	you take to address the c		s Grant Satisfactory Academic Progress (SAP); om meeting Texas Grant SAP and how you will
Please check one of the following lister	d below:		
The Hardship Provision(s) marked belo	w is the reason for my app	peal and I am including appropriate su	pporting documentation for my circumstance:
A showing of a severe illne	ss or other debilitating c	ondition that affected the student's	academic performance;
An indication that the stud of care affected his or her a			erson and that the student's provision
		ete one's degree plan during the gra tion from your Academic Advisor th	
Other reason: Please explain your person	al hardship situation by in	ncluding a typed statement and supp	porting documentation.
I understand that if my TEXAS Grant Grant in subsequent years. These red			elow to continue receiving the TEXAS
 I understand that I will be refollows: First year recipients 67 percent of the hours atte complete 24 hours per year value I must be a Texas resident; and 	ree-quarter-time or full- quired to maintain Satisf (less than 30 total credit mpted. Renewal student vith a 2.5 overall GPA; d a felony or any crime invo	time at The University of Texas at El factory Academic Progress in order t thours) must maintain an overall GF s with 30 or more credit hours and s olving a controlled substance or under	o continue receiving this grant as PA of 2.0 or above and must complete tudents with an associate degree must
Lastly, by being allowed to appeal the only one appeal and if I fail to meet p			on, I understand that the State permits witted to appeal a second time.
By signing this form, I agree to all ter	ms and conditions listed		
Student Signature			te

For Office Use Only: Approved:

Not Approved:

Date:

Initials: