

Office of Student Financial Aid (OSFA) Mike Loya Academic Services Building, Room 204 500 W. University Avenue El Paso, Texas 79968 PH: (915)747-5204; FAX (915)747-5631

## **TEXAS GRANT APPEAL - HARDSHIP PROVISIONS 2023-2024**

Student's Last Name	First Name	Middle Initial	UTEP ID Number
Student's Primary Phone	e	Student's Email Address	Student's Date of Birth
A student who is ineligible for a TEX total hours enrolled may be deeme			erage (GPA), number of completed hours, or
			udent's TEXAS Grant award based on certain swers the following questions, and provide any
	ill you take to address the		Grant Satisfactory Academic Progress (SAP); n meeting Texas Grant SAP and how you will
Please check one of the following lis	ted below:		
The Hardship Provision(s) marked	below is the reason for my	appeal:	
A showing of a severe ill	ness or other debilitating	condition that affected the student's a	cademic performance;
	cudent was responsible for er academic performance;	the care of a sick, injured, or needy pe or	rson and that the student's provision
The requirement of few at least 6 UTEP credits.	er than nine hours to com	plete one's degree plan during the grad	luating term. You must be enrolled in
Other reason: Please explain your pers	onal hardship situation by	including a typed statement.	
Grant in subsequent years. These  1. I have or will complete th  2. I am/will be enrolled eithe  3. I understand that I will be follows: First year recipies  67 percent of the hours are complete 24 hours per year  4. I must be a Texas resident;  5. I have not been convicted controlled substance as defulation.	requirements are as followe FAFSA each year to demonstrated to maintain Satints (less than 30 total creditempted. Renewal studer with a 2.5 overall GPA; and of a felony or any crime in fined by the Texas Controlled.	onstrate financial need; I-time at The University of Texas at El P sfactory Academic Progress in order to lit hours) must maintain an overall GPA nts with 30 or more credit hours and sto volving a controlled substance or under t	aso each semester; continue receiving this grant as A of 2.0 or above and must complete udents with an associate degree must he law of any jurisdiction involving a
By signing this form, I agree to all	terms and conditions liste	d.	
Student Signature:		Date	::
For Office Use Only:			
School Certifying Official:		Date	: