

UNIVERSITY of HOUSTON

OFFICE OF SCHOLARSHIPS & FINANCIAL AID

2012-2013 TEXAS Grant Hardship Provision Request Form

Deadline for submission

Fall 2012: November 2, 2012

Spring 2013: April 1, 2013

This form can only be completed by previous recipients of the TEXAS Grant award.

First Name	Last Name	myUH ID	Email Address
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The State of Texas requires that students who receive the TEXAS Grant must meet and maintain all of the following:

- Satisfactory Academic Progress (SAP)
- Enroll in at least **9 credit hours** per semester of award
- Cumulative **GPA of 2.50**
- Complete/Pass **24 credit hours** in an academic year
- Pass **75% of the classes attempted** in an academic year

If eligible, complete this form and attach your typed explanation and necessary documentation to support your reason(s) for the request. The explanation must be detailed, clearly stated and limited to one page. If your request is approved, the TEXAS grant will be reinstated for the 2012-2013 academic year provided you are enrolled in at least 9 credit hours each semester.

My hardship request is based on the following:

- ☐ Medical (severe illness or other debilitating condition)
☐ Family (illness or death of a family member)
☐ Caretaker (responsibility for the care of a sick, injured, or needy person)
☐ Graduation _____ Fall 2012 _____ Spring 2013 (enrolled in less than 9 credit hours)
☐ Other (please explain) _____

Student Certification: I understand that decisions are made on a case-by-case basis. I understand the submission of this form does not constitute an approval of my request. I will be notified of the decision by email at the address provided through People Soft Self Service in approximately 4 weeks. *Any fees I may owe the university are due on the date specified regardless of the status of my hardship.*

Student Signature

____/____/_____
Date

FOR OFFICE USE ONLY

Prior Hardship Request: YES _____ NO _____ GPA: _____ Total Hours Completed: _____ Completion Rate: _____

Current Enrollment Hours: _____ Decision: APPROVED _____ DENIED _____

Staff Signature

____/____/_____
Date

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.

University of Houston - Office of Scholarships and Financial Aid 31 E. Cullen Building, Houston, TX 77204
(713)743-1010 fax (713)743-9098 Welcome Center M-T 8am-7pm W-F 8am-5pm www.uh.edu/financialaid