



INSTITUTIONAL SCHOLARSHIP PROGRAM AND DEGREE PLAN FORM

Complete this form if you have been required to do so as part of your scholarship appeal. This form must be completed and signed by a Professional Academic Advisor in the Office of Student Success or the Associate Vice President for Enrollment Management and attached to your appeal application.

For an appointment with a Professional Academic Advisor please call 970-382-6985.
Check the Scholarships website for appeal deadlines: <https://www.fortlewis.edu/flc-scholarships/InstitutionalScholarships/InstitutionalScholarshipAppeals.aspx>

Last Name	First Name	MI	ID Number
Degree: ___ B.A. ___ B.S.		Catalog Year: 20____ - 20____	
Major: _____		Major: _____	
Minor/Certificate: _____		Minor: _____	
Expected date of graduation: <input type="checkbox"/> Spring 20____		<input type="checkbox"/> Summer 20____	<input type="checkbox"/> Fall 20____

Use the following codes to identify the type of course on the degree plan:

Liberal Arts Core	LAC
Major	MAJ
Minor	MIN
Certificate	CERT
Remediation	TRS
Elective to reach 36 credit upper-division requirement	Elect/36
Elective to reach 120 credit minimum	Elec/120

Students appealing due to exceeding award length are only allowed to request their scholarship for the courses necessary to complete their declared major(s), certificate/minor(s). This is the definition of "course of study".

Term and Year:		
Subject and course#	Type of course (LAC, MAJ, MIN, CERT, etc.)	Credits

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To the best of my knowledge, this plan contains only courses needed to complete the student's course of study in the most efficient time frame possible.

Print Advisor's Name

Advisor's Signature

Date

I understand that if my scholarship appeal is approved, my scholarship will be based on the number of credit hours outlined each term on this plan, and that I am expected to follow the plan exactly.

Student's Signature

Date

This form can only be signed by a Professional Academic Advisor or the Associate Vice President for Enrollment Management. This form along with all applicable appeal documentation must be received by the Office of Financial Aid by the deadline in order to be reviewed.

FAX
970-247-7108

EMAIL
finaid_off@fortlewis.edu
In subject line, write:
Scholarship Appeal for
[Student's Name]

HAND DELIVER
Office of Financial Aid
101 Miller Student Services

MAIL
Fort Lewis College
Office of Financial Aid
1000 Rim Drive
Durango, CO 81301