AMAP24



WAYNE STATE UNIVERSITY | Office of Student Financial Aid

The Welcome Center • 42 West Warren • P.O. Box 2340 • Detroit, MI 48202-0340 • Fax: 313-577-6648 studentservice@wayne.edu • wayne.edu/financial-aid • Check your aid status at academica.wayne.edu

2023-24 WSU Scholarship/Program/Grant Appeal For
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Student's First Name			WSU AccessID		
Student's Last Name			Phone Number		
NHO SHOULD COMP	I ETE TUIS EOD	NA		L	
			. tuition pledge pro	grams or university grants for at least	
		= -		est reinstatement of the award for the	
all semester 2023 or win	ter semester 2024	I. Scholarships: Anthony Wayı	ne, Distinguished, D	etroit Leadership, Detroit Urban	
cholars, Gold, Green, Pre	esident's, Preside	ntial, Scholar Award, Universit	y, Warrior, or Path	way. Tuition pledge programs: Wayne	
access, Heart of Detroit, E	Born to Be a Warr	ior. University grants: WSU Pr	omise Grant.		
	An elect	ronic version of this form is a	vailable on our <u>we</u>	bsite.	
NSTRUCTIONS					
1. Check the boxes	that describe you	r status.			
Scholarship/program/g	rant name:				
First semester you recei	ived the award:	Fall 20 Winter	20		
Award condition(s) you	did not meet:	Below required GPA B	Below required credit	hours Withdrawal from classes	
Reason the award condition(s) was/were not met:		Personal illness Family illness Need more time to complete degree Other			
to comply with t	he conditions of y		ng renewal because	circumstances that affected your ability e you need more time to complete you	
3. Attach to this for includes the date		at support your explanation, e	.g., doctor/urgent c	care/emergency room invoice/bill that	
vebsite for information about	t WSU's federal law-ı vould like to speak co	nandated obligation to report the i onfidentially to a counselor for sup	nformation to the Univ	the WSU Office of the General Counsel Title I versity's Title IX Coordinator for follow-up and SU Counseling and Psychological Services at	
responsible for		tuition and fees. To apply for		m or grant is not reinstated, you are I, file the 2023-24 Free Application for	
			tion I have provided	d on this form and on all documents is	
true and co	implete to the bes	t of my knowledge.			
Student signa	ature (Signat	ure must be handwritten with ink	or stylus)	 Date	

Print your name and student ID on all documents