

**UNIVERSITY OF ILLINOIS CHICAGO – Office of Student Financial Aid and Scholarships**

1200 W. Harrison Street, M/C 334 -- Chicago, Illinois 60607-7163 -- Phone: (312) 996-3126



**2024-2025 Budget Adjustment – Faculty Directed Program**

**Section A – Student Information (Please Print Clearly)**

Last Name First Name M.I. Email

Program Name Dates City Country

**Program Term:** \_\_\_\_\_ (Fall 24, Spring 25, or Summer 25)

**Number of Credit Hours for Faculty Directed Program:** \_\_\_\_\_

**Faculty Directed Program Contact Name and Email Address:** \_\_\_\_\_

**Course Subject/Name and Number:** \_\_\_\_\_

This Form is to be completed by UIC students who are enrolled in an **Approved** UIC Faculty Directed Program and wish to request financial aid. You must also complete a 2024-2025 FAFSA (<https://studentaid.gov/h/apply-for-aid/fafsa>) and submit all required documents by March 1 for summer, June 1 for fall, and October 1 for spring. Please submit this form along with the following items to Student Financial Aid and Scholarships (SFAS).

**A Copy of Your Program Cost Sheet.** You can find your program cost sheet on the UIC Study Abroad Office website at <http://studyabroad.uic.edu>. For Assistance, please contact your UIC Study Abroad Office advisor at [sao@uic.edu](mailto:sao@uic.edu).

**Section B – Faculty Directed Program Student Agreement and Signature**

- ☐ I certify that I will enroll for courses that will be accepted as academic credit earned towards my graduation from UIC. Credit earned must be at least a letter grade of D.
- ☐ I certify that I am enrolled in a degree seeking program and have not already fulfilled my graduation requirements.
- ☐ I will notify UIC Study Abroad Office and Student Financial Aid and Scholarships promptly if I withdraw from my course(s) or change my enrollment or courses. I understand that such actions will affect my financial aid eligibility resulting in my student account at UIC being billed for the aid which I am no longer eligible to receive.
- ☐ I understand that I must meet enrollment requirements to be eligible for federal, state, and institutional aid programs. For private scholarships, please check with the awarding agency for their enrollment policy.
- ☐ I understand that I am responsible to pay all charges associated with the Faculty Directed Program.
- ☐ I understand that I must meet Satisfactory Academic Progress (SAP) to be eligible for financial aid. The detailed SAP Policy is available at: [https://docs.financialaid.uic.edu/docs/SAP\\_Policy.pdf](https://docs.financialaid.uic.edu/docs/SAP_Policy.pdf).

**PLEASE NOTE:** Approval of this budget adjustment request is not automatic or guaranteed. Alternative Loans (which are subject to credit check approval) may be the only financial aid options available. I have read and I agree with the terms and conditions listed above. I understand that if I do not meet the requirements, I may not be eligible to receive Federal, Institutional, or State funds to pay for my Faculty Directed Program expenses.

Student Signature

Date

ENTER YOUR 9-DIGIT UIN



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