



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.

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.

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's Signature

Date

NOTE: Signatures cannot be typed or stamped. They must be a signature.

ENTER YOUR 9-DIGIT UIN 

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