



TERM	PRIORITY DATE TO SUBMIT	FINAL DEADLINE
Summer 2019	June 3, 2019	June 24, 2019
Fall 2019	June 28, 2019	September 16, 2019
Spring 2020	December 6, 2019	January 24, 2020

Satisfactory Academic Progress- Extended Academic Plan

INSTRUCTIONS>>>

Student's Name (Last, First, MI) _____ myWSU ID Number _____ Date _____

Degree _____ Major _____ Anticipated Graduation Date _____

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Semester/Year: _____/20____

Course Name	Cr. Hrs.
Total	

Student's Signature **(Required)** _____
Digital signature cannot be accepted.

Adviser's Signature **(Required)** _____ Date _____
Digital signature cannot be accepted.

Adviser's Printed Name _____ Phone Number _____

Adviser's Department/College _____

WICHITA STATE UNIVERSITY | Office of Financial Aid | Jardine Hall Rm. 203 | 1845 Fairmount Street | Wichita, KS 67260-0024
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FOR OFFICE USE ONLY:
Tracking Code:
Revision Date: 6/18/2019

1819 = Summer 2019
1920 = Fall 2019 / Spring 2020

EXAPL1 (1st) EXAPL2 (2nd) EXAPL3 (3rd)
EXAPL1 (1st) EXAPL2 (2nd) EXAPL3 (3rd)