## **Satisfactory Academic Progress** 2026-2027



## FINANCIAL AID AND SCHOLARSHIPS

	Revised	cademic Plan	
Student's Name (Last, First, MI)		WSU ID Number Academic College	<del></del>
 Degree	<del>-</del>	ajor Graduation Date (MM/Y	 'YYY)
Term	Priority Dat	Final Deadline	
Fall 2026	July 24, 202	August 28, 2026	
Spring 2027	November 2		
Summer 2027	May 28, 202	June 11, 2027	
<pre>INSTRUCTIONS &gt;&gt;&gt;     Meet with your College Academic Adv     must provide signatures. Semester/Year:</pre>	isor to complet	ur revised academic plan. You and your academic advis	or
/20		/20	
Course Name	Cr. Hrs.	Course Name	Cr. Hrs.
Т	otal	Total	
Semester/Year: /20_		Semester/Year: /20	
Course Name	Cr. Hrs.	Course Name	Cr. Hrs.
	otal	Total	
*Additional pages may be submitted as ne	eded.		
CERTIFICATIONS AND SIGNATURES			
purposely give false or misleading info	rmation on this	ormation, you may have to return it and/or pay fines and m, you may be fined \$20,000, receive a prison sentence, n I have submitted is accurate and verified with supporti	or both.
→ Please allow 2-3 weeks for processing.	Processing car	begin until all requested documentation has been rece	ved.
Student's Signature Typed Signature cannot be accepted	Date	Student's Printed Name	
Advisor's Signature  Typed Signature cannot be accepted	Date	Advisor's Printed Name	

1845 Fairmount Street | Wichita, KS 67260-0024 (316) 978-3430

wichita.edu

**Revision Date: 10/15/2025**