

ACADEMIC APPROVAL

Academic Advisor/Chair/Associate or Assistant Dean (Print)

Office Phone Number

Signature of School/College Official

Date

FOR OFFICE OF STUDENT ASSISTANCE USE ONLY

- WITHDRAWN FROM CURRENT SEMESTER AND/OR DROP FROM FUTURE SEMESTER
- NOTIFIED TUITION APPEAL ABOUT POTENTIAL MEDICAL CANCELLATION
- CREATE NEW SGASTDN RECORD
- UPDATE STUDENT STATUS
- UPDATE CURRICULA TAB (then SAVE)
- NOTIFIED CAMPUS DIRECTOR/ASSOCIATE DIRECTOR OF FINANCIAL AID BY EMAIL (IF PACE MERIT BASED AID RECEIVED)
- SENT APPROVAL LETTER
- SENT CONSENT FOR COMMUNICATIONS
- SENT AUTHORIZATION FOR INFORMATION RELEASE
- SENT RESUMPTION OF STUDIES AFTER A MEDICAL LEAVE OF ABSENCE APPLICATION
- SCAN INTO BDMS AND FILE ORIGINAL

PROCESSED BY _____ DATE _____

OSA REPRESENTATIVE