Office of Scholarships and Financial Aid  
Remaining Hours Required for Degree Completion

Please Use Black or Blue Ink

<table>
<thead>
<tr>
<th>Student Name:</th>
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The student is also required to submit the Satisfactory Academic Progress Appeal form outlining the circumstances leading to excessive hours attempted. The remainder of this form is to be completed by the student’s academic advisor or authorized representative within the academic department.

To Be Completed by the Academic Advisor:

By federal regulation, students have a maximum time frame (total hours attempted, including grades of “W”) in which to complete degree requirements and still qualify for financial aid. If an exception is to be made, the rationale must be documented and available for audit in the student’s financial aid file.

<table>
<thead>
<tr>
<th>Degree Sought</th>
<th>Maximum Hours Allowed</th>
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<tbody>
<tr>
<td>Undergraduate*</td>
<td>180*</td>
</tr>
<tr>
<td>Masters**</td>
<td>56**</td>
</tr>
<tr>
<td>Doctorate</td>
<td>128</td>
</tr>
<tr>
<td>Doctor of Veterinary Medicine</td>
<td>255</td>
</tr>
</tbody>
</table>

*BAR in Architecture maximum is 231 hours  
*BEN in Architectural Engineering maximum is 236 hours  
*BLA in Landscape Architecture maximum is 225 hours  
*BSBE in Biosystems Engineering maximum is 200 hours  
*BSCV in Civil Engineering maximum is 204 hours  
**MS in Comm Sciences and Disorders maximum is 78 hours  
**MS in Counseling maximum is 90 hours  
**MBA in Business Administration maximum is 78 hours

1. Academic Plan: ______________   __________________________  ________________  
   Degree       Major        Option (if applicable)

2. Anticipated Graduation: _________________ ______  
   Semester      Year

3. Why does the student need to take additional hours to satisfy degree requirements? For example, has the student lost hours through transfer, changes in major, etc.?

4. How many additional hours are required to complete the degree? _______________________
   Please include any planned Spring 2018 enrollment in your calculation.

   ______________________________________________________  
   Name of Advisor (please print or type)  Academic Department

   ______________________________________________________  
   Signature of Advisor(electronic signatures not acceptable)  Date

Return to:
Office of Scholarships and Financial Aid  
119 Student Union  
Stillwater, OK 74078-5061  
Phone: (405) 744-6604  
Email: finaid@okstate.edu  
FAX: (405) 744-6438

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