TAP WAIVER- POLICIES and PROCEDURES

(Submit the following three items to the Registrar’s Office for your TAP Waiver):

1. REQUEST FOR WAIVER OF ACADEMIC PROGRESS or PROGRAM PURSUIT REQUIREMENTS form
   (Complete and submit this to the Registrar’s Office immediately with item #2)

2. Proof of the unusual circumstances (Complete and submit this to the Registrar’s Office immediately
   with item #1)

3. Letter from advisor or EOP counselor assessing your ability to meet future academic requirements
   (Your advisor may need additional time to determine your current status–please make certain that the
   letter is submitted to the Registrar’s office as soon as possible)

1. The College at Purchase in accordance with New York State Education Department guidelines, permits
   students to request a waiver in the academic progress or program pursuit requirements for the continued
   eligibility for payment of State awards (e.g. – Tuition Assistance Program)

2. The following criteria applies to the granting of waivers:
   a. The waiver is not automatic
   b. The waiver is intended only to accommodate extraordinary or unusual circumstances
   c. The waiver process includes the assessment of the reasons for the failure to meet academic progress
      of program pursuit requirements
   d. The waiver may be granted only if there is good reason to believe the student will meet future
      requirements
   e. The waiver may be granted only once for undergraduate study, and only once for graduate study. In
      some instances, however, a student may receive more than one TAP waiver
   f. The waiver must be completed within 15 days after the notification letter or email is issued by the
      Registrar

3. In order to apply for a waiver, you must submit a completed request form to the Registrar’s Office by the
   date indicated in the notification letter initiated by the Registrar. Failure to request a waiver and provide all
   necessary documentation by the date specified shall be construed that you have no intention to pursue a
   waiver and you forfeit, therefore, entitlement to such consideration for that specific period of time.

4. Upon submission of the request form and documentation to prove the extraordinary circumstance, your
   documentation will be reviewed by a member of the Registrar’s Office. You may be asked to provide
   additional proof or information regarding your circumstances.

5. When submitting the request for waiver of the academic requirements, you should provide clear evidence
   to prove the conditions of the unusual circumstance (i.e.-clear doctor’s letter, letter from lawyer if parent
   becomes separated, etc.) along with a letter from your faculty advisor, which would assess your ability to
   meet future academic requirements. EOP students must have a statement from their EOP counselor.

6. The Associate and Assistant Directors of Financial Aid will evaluate the stated reasons given for your
   academic difficulty, review your academic records, and consult with other appropriate faculty members.

7. The Associate and Assistant Directors of Financial Aid will forward a recommendation to the
   Provost/Provost’s designee who will make the final decision governing the use of a waiver

8. If a waiver is not granted, you will be decertified for payment of your State award for the term indicated, and
   for future terms, until you meet the minimum requirements. If your State award was previously credit as an
   advance deferment of payment of tuition, decertification will result in your needing to make arrangements
   with Student Financial Services to pay the balance of your tuition no longer covered by your State award.
NAME: __________________________________ PID: ____________________

ACADEMIC PROGRAM OF STUDY: ____________________________________________

COMPLETED CREDITS: _________ DATE OF ENTRY AT PURCHASE: ______________
CREDITS IN PROGRESS: _________ EXPECTED GRADUATION DATE: ______________

Are you now, or have you been previously, placed on academic probation?  ____YES  ____NO

If yes, please specify the academic terms covered by the probation (and whether you previously fulfilled the conditions of probation).

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please describe the reasons for you academic difficulty and how you plan to resolve your academic problems. (Attach a signed statement, if appropriate):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

I hereby request consideration for the granting of a one-time waiver of academic progress or program pursuit requirements. I understand that the waiver, if granted, pertains only to the continued certification of my eligibility for payments of State awards, and should not be construed as an exemption to fulfilling any of my academic requirements at Purchase College. I also understand the purpose, intent, and general criteria for the granting of such waivers.

Date: ___________________ Signature: ______________________________

*****THIS SECTION TO BE COMPLETED BY THE FINANCIAL AID OFFICE*****

RECOMMENDATION:

Documentation for this student became complete on ___________ and was reviewed on ___________

I recommend that: ______________________________________________________________
________________________________________________________________________
________________________________________________________________________

Associate Director of Financial Aid Signature: _______________________________ Date: __________
Financial Aid Official Signature: _________________________________ Date: __________

*****THIS SECTION TO BE COMPLETED BY PROVOST'S OFFICE *****

WAIVER ACTION: (Please check one of the following)
Based upon the preceding information and in accordance with the New York State Education Department guidelines, the granting of a waiver for this student has been: ___Granted  ___Not Granted

Provost Signature: ___________________________________________________________ Date: __________