

GOUCHER | college
2026-2027 – 5th Year Aid Request

How to submit:

Upload: goucher.edu/faupload

Fax: 410-337-6504

Under most circumstances institutional aid (including merit scholarships, grants, and endowed funds) is limited to eight semesters. Institutional financial aid for a 9th or 10th semester may be awarded on a limited basis.

Please note that returning students will not be packaged for financial aid until mid-June 2026. You may not have a final determination on your appeal until that time.

Student Last Name

Student First Name

Goucher ID Number

Eligibility

- The student must have a complete and verified 2026-2027 FAFSA.
- The student must be registered for Fall 2026.
- The student must be making Satisfactory Academic Progress (SAP).

Anticipated Graduation Date: _____

Anticipated Fall 2026 enrollment

Full-time (12+ credits) Half-time (6-11 credits) Less than half-time (<6 credits)

Anticipated Spring 2027 enrollment

Full-time (12+ credits) Half-time (6-11 credits) Less than half-time (<6 credits)

Anticipated housing arrangements

On campus Off campus Living with parent(s)

Please provide a formal appeal and clear explanation of the special circumstance(s) that created your need to continue beyond 8 semesters. Your explanation should be detailed and at least a paragraph. Include any specific dates or semesters for key events as needed. (Incomplete coursework or non-passing grades alone may not be enough to be eligible for more than 8 semesters of aid without a special or outside circumstance. Please provide third party documentation as needed.)

Next Steps

Student Financial Services will review your request and email you the outcome. **Please be sure to check your Goucher email.**

STATEMENT OF UNDERSTANDING

- I understand that additional documentation may be needed to process this request, and that documentation will be provided in a prompt manner.
- I understand that alternative out-of-pocket payment arrangements may be needed depending on enrollment or satisfactory academic progress issues.
- I understand that I must notify Student Financial Services immediately of any changes in enrollment status and those enrollment changes may result in a financial aid eligibility change.

By signing this form, I certify all information reported on this form & within the enclosed documentation is complete & correct.

Student Signature

Date

(You may type in your name as your electronic signature.)