



## Need Assistance?

Contact the Financial Aid Office 1290 North Ave  
Cleveland, WI 53015  
Toll Free: 1.888.GOTOLTC, ext. 1718  
Email: [financial.aid@gotoltc.edu](mailto:financial.aid@gotoltc.edu)  
Fax: 920-693-1834

## Maximum Time Frame Plan

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Program Counselor: \_\_\_\_\_ Program/Degree: \_\_\_\_\_

Number of credits needed to graduate: \_\_\_\_\_

Your appeal for exceeding the maximum time frame has been approved. You can regain eligibility by establishing a Maximum Time Frame Plan with your Program Counselor. A maximum time frame plan determines the remaining courses needed for graduation from your program as well as when those courses will be taken. As long as you follow the terms of the Maximum Time Frame Plan, you will be considered meeting satisfactory academic progress. *Failure to follow the Maximum Time Frame Plan will result in a loss of financial aid (which includes grant, work-study, and student loans).* Should a need arise to change the Maximum Time Frame Plan, or if you fail to meet the terms of the Maximum Time Frame Plan, you will be allowed a **one-time** appeal. After that, you will lose all financial aid eligibility.

### **Determine required courses and when you will take each one**

Create a Maximum Time Frame Plan using the attached template (or similar listing) to list as the courses needed to graduate.

- Only list courses required for your program/degree. No other classes should be taken.
- Ensure you have met the prerequisites for the classes.
- **If a semester is open for registration you must be enrolled according to your plan before your plan can be approved.**

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Program Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Return this completed form to the Lakeshore Financial Aid Office***

The financial aid office will consider your explanation and documentation during the review of the appeal. After a decision is made, you will be notified via your Lakeshore student email.

### **FA Office Use Only:**

☐ Approved

☐ Not Approved

Staff Initials: \_\_\_\_\_

Date: \_\_\_\_\_



**Need Assistance?**  
Contact the Financial Aid Office 1290 North  
Ave Cleveland, WI 53015  
Toll Free: 1.888.GOTOLTC, ext. 1718  
Email: [financial.aid@gotoltc.edu](mailto:financial.aid@gotoltc.edu)  
Fax: 920-693-1834

## Maximum Time Frame Plan

---

Catalog Number	Class Name	Number of Credits	Semester Taking Class