2015 – 2016 Financial Aid Satisfactory Academic Progress Appeal Request

Student Name: ___________________________________________ Student ID#: ________________

Address: _______________________________ Phone #: ______________________________

City/State/Zip Code: ___________________________ Date of Birth: ___________________

Term Appeal being applied for: _______________________ Program: __________________________

Students who are not meeting the satisfactory academic progress policy may appeal for reinstatement of financial aid eligibility. An appeal can only be submitted if a student’s failure to make satisfactory academic progress is based upon events beyond the student’s control.

**Step 1:** You must provide a signed letter of explanation detailing the circumstance(s) that led to the satisfactory academic progress violation. **Documentation is REQUIRED** for the reasons you have indicated in your letter that prevented you from making satisfactory academic progress. Attach your documentation and your letter of explanation to this form.

Listed below are examples of events/circumstances that merit an appeal:

<table>
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<tr>
<th>Circumstance:</th>
<th>Examples of Proper Documentation:</th>
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| Death of Immediate Family Member     | 1)Death Certification  
                                      | 2)Newspaper Obituary                                                                                     |
| Extended Illness or Hospitalization  | Physician’s statement on letterhead, including:  
                                      | 1)dates of treatment  
                                      | 2)condition that requires student to miss college/prevent completion of semester  
                                      | 3)affirmation that situation has been completely resolved                                                  |
| Significant Trauma                   | Statement on letterhead from a professional counselor, minister, or attorney, including:  
                                      | 1)Dates and details of trauma  
                                      | 2)Explanation how problem prevented student from succeeding in college  
                                      | 3)Details of resolution                                                                                     |
| Personal Problem                     | Statement on letterhead from a professional counselor, minister, or attorney, including:  
                                      | 1)Dates and details of the personal problem  
                                      | 2)Explanation how the problem prevented the student from succeeding in college  
                                      | 3)Details explaining the resolution of the issue                                                             |
| Maximum Timeframe (150%)             | 1)Statement from student explaining circumstances  
                                      | 2)Program EVAL from Program Advisor with projected/expected date of completion and advisor’s signature  
                                      |
Step 2: Check appropriate box(s) for reason(s) not meeting Standards of Academic Progress: (If unsure, please contact the Financial Aid office).

☐ Cumulative GPA under a 2.0

☐ Cumulative pass rate under at least 67%

☐ Maximum Time Frame of 150% exceeded to complete program of study due to change of program

Step 3: In your letter of explanation, you MUST indicate what you have done and plan to do to address the problems that prevented you from making satisfactory academic progress. This plan of action along with any other documentation will be taken into consideration when making a decision regarding your appeal. An appeal submitted without this plan will NOT be considered.

Step 4: Certification and signature. I, ________________________________ am requesting to have my eligibility for financial aid reinstated. I understand that my appeal will not be reviewed if it is incomplete or lacks documentation. By signing this form, I certify that the information provided in my letter and documentation is truthful and accurate.

I also understand that if I purposely give false or misleading information in connection with my application for Federal Aid (FAFSA and CCCC Documentation), I may be subject to a fine of up to $20,000, imprisonment, or both.

Student Signature: ______________________________________________ Date: ________________

FA OFFICE USE ONLY:

Date received by FAO: ________________ Outcome: Approved: _____ Denied: _____

Date of review: ______________________ Effective Term: ______________________________

Comments: ____________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

FAO Signature: ______________________________ Date: ________________