



# Office of Financial Aid

## 2018-19 Unsatisfactory Academic Appeal Form

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Term Appealing: (Pick One) Fall 2018 \_\_\_\_\_ Spring 2019 \_\_\_\_\_ Are you currently on appeal YES or NO

I did not meet the following terms of the Colleges SAP policy: GPA \_\_\_\_\_ Completion Rate \_\_\_\_\_ Both \_\_\_\_\_

**Steps to Appeal:**

1. Complete FAFSA application for 2018-19 at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) .
2. Complete the appeal form.
3. **THE DEADLINE FOR FALL 2018 IS OCTOBER 15, 2018 AND SPRING 2019 IS MARCH 1, 2019.**
4. Write or type a statement explaining why you did not meet the terms of the college academic progress policy. All appeals must have a written explanation and supporting documentation of the extenuating circumstances.
5. You are encouraged to meet with an academic advisor to develop an academic plan to finish your CCC education.

**My extenuating circumstance(s) that prevented me from making satisfactory academic progress is:**

- \_\_\_ a. Serious medical condition or injury requiring extended recovery time
- \_\_\_ b. Personal problems (family issues, housing problems, etc.)
- \_\_\_ c. Death or serious illness of an immediate family member (Parent, child, sibling)
- \_\_\_ d. Illness (recent or long term)
- \_\_\_ e. Job related problems
- \_\_\_ f. Military Service
- \_\_\_ g. Other : \_\_\_\_\_

**Please list the Supporting Documentation being submitted:** (examples: doctors' notes, obituary, proof of hospitalization, court documentation, death certificate, DD214) \_\_\_\_\_

**Initial the following statements:**

\_\_\_ I understand that my financial aid has been removed and I am responsible for any charges that I may incur if this appeal is not granted.

\_\_\_ I understand that I am only allowed one Unsatisfactory Academic Appeal at CCC; to continue to be funded, I must meet the term of the appeal each semester I register.

\_\_\_ I understand that I must have a "C" or better in all courses that I am registered for; grades of W, I, RV, MP, NA and XA are all punitive grades and will nullify the terms of my appeal if granted.

**My signature below confirms that all of the information I am providing for this appeal is true, accurate, and complete.**

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

## FINANCIAL AID OFFICE USE ONLY

**FAO Supervisor**

**Date**

**Approved**

**Denied**

Was not making progress prior to semester cited in appeal.

Appealed previously, did not meet prior conditions

Insufficient documentation of statements in appeal

Circumstances do not meet appeal threshold.

Dates of circumstances do not coincide with academic record

See comments

**Comments:**