

# Appeal Form for Title IV

This form must be filled out entirely and include supporting documentation, if at all possible.

Name \_\_\_\_\_ (please print) ID# \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Date \_\_\_\_\_

Program of Study To Appeal: \_\_\_\_\_

Semester (To Receive Financial Aid): (check one) \_\_\_\_ Fall \_\_\_\_ Spring \_\_\_\_ Summer Year \_\_\_\_\_

**Attach a signed appeal letter describing the reason(s) why you have not met Satisfactory Academic Progress (SAP) standards. (Please type, print, or write very legibly.)**  
**Also, see an academic advisor for both completed and signed Academic Plan forms.**

## Satisfactory Academic Progress Problem:

- IGP - Cumulative Grade Point Average (GPA) Below a 2.00 at SCC  
 IHR - Have not successfully completed 67% of the hours completed at SCC  
 MAX - Have not earned a degree within 150% of the time allowed at SCC

## Reason For Not Meeting Satisfactory Academic Progress Standards:

- Personal illness (provide documentation)  
 Family illness (provide documentation) Relationship: \_\_\_\_\_  
 Death in family (provide documentation) Relationship: \_\_\_\_\_  
 Other : \_\_\_\_\_

## Student Signature

## Date

Return this form, signed letter, Academic Plan

### forms, & documentation to:

Financial Aid Office

Shawnee Community College

E-mail: [finaid@shawnecc.edu](mailto:finaid@shawnecc.edu)

Phone: (618) 634-3200 Option 1, option 2

Fax: (618) 634-3368

### \*\* Financial Aid Office Use Only \*\*

Date Received \_\_\_\_\_

SAP Code: \_\_\_\_\_

Term GPA: \_\_\_\_\_ Eval

Cum. GPA: \_\_\_\_\_ Tran

#Hours Enrolled: \_\_\_\_\_

Approved  Denied

### Financial Aid Notes:

Called and spoke with student \_\_\_\_\_

Message left for student \_\_\_\_\_

Called and no answer / No Voicemail \_\_\_\_\_

### Appeal Committee Signatures

### Dates

\_\_\_\_\_

\_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

# Appeal Letter Outline

Current Date

Dear Appeals Committee:

Paragraph 1 (*explain reason for letter—grades, 67% rule, have not earned a degree*)

Paragraph 2 (*explain reason for becoming ineligible*)

Paragraph 3 (*include any changes you plan to make to correct the problem*)

Paragraph 4 (*closing and contact information*)

Sincerely,

Student's signature

## **NOTE:**

***Please provide any documentation for circumstances mentioned in this letter. Possible documentation could include (but is not limited to) a death certificate, obituary, birth certificate, hospital bill, doctor's excuse or diagnosis, legal court documents, vehicle repair bill, accident report, or a police or fire report. All documentation should be as clear as possible, easy to read, and correspond to the dates of your ineligibility. Letters should be printed or typed and include student's handwritten signature.***