



CENTRAL PIEDMONT COMMUNITY COLLEGE

Financial Aid Satisfactory Progress Appeal Request

Name of Student: _____ Student ID #: _____
Please print

Street Address: _____ City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____

Program of Study: _____ Anticipated Graduation Date: _____

(Please submit a copy of your program evaluation highlighting the courses you need to take to complete your degree. You can access your Program Evaluation through the CPCC website by going to: www.cpcc.edu; My CPCC; My College; Log In; Students; Academic Profile; Program Evaluation.)

It has been determined that you are not making academic progress toward graduation. Grade point average and the percentage of credit hours completed define satisfactory academic progress. Federal and state regulations require students to comply with standards of academic progress as defined by the Office of Financial Aid. Students that fail to meet the minimum standards lose their eligibility to receive federal and state aid. Federal regulations also allow the Office of Financial Aid to extend eligibility to students that fail to meet minimum standards can document that there were mitigating circumstances beyond their control that caused them to perform below standards. Documentation must be submitted with your appeal to support your statement. Working, taking care of children, did not study, was not prepared for college, etc. are not examples of mitigating circumstances. **Examples include: medical conditions that resulted in hospitalization for more than 14 days, loss of an immediate family member, loss of home due to fire, storm or natural disaster, illness of student or immediate family member, severe emotional difficulties, death in the family, loss of employment, etc.** The mitigating circumstances must occur during the term you received failing grades and/or withdrew from classes.

ONE APPEAL PER ACADEMIC YEAR WILL BE CONSIDERED.

Note:

- *Appeals based solely on financial and/or emotional needs without sufficient explanation or documentation will not be approved.*
- *Work is not considered a hardship since financial aid is viewed as a supplement to student's income in order to help reduce the number of hours the average student would have to work in any given week.*
- *It is the responsibility of the student to successfully complete all classes enrolled. Please remember that dropping a class, failing a class, or withdrawing from a class is a personal decision made by the student.*
- *Do not include childcare as a hardship since this would have been an issue if you work and before you enrolled in classes.*

Students on financial aid suspension should not depend on financial aid to pay for costs of registration, but should be prepared to pay from their own resources pending the outcome of their financial aid appeal.

Appeals submitted without proper documentation will be **DENIED**. Incomplete forms will **not** be reviewed.

We recognize that extenuating circumstances may prevent a student from completing a semester or specific hours in one semester. Due to our concern for a student's success, **we require students who receive an approved appeal to attend a Satisfactory Academic Workshop or meet with the Financial Aid Retention Counselor.**

SECTION A

Suggestions on Writing Your Appeal

Submit your appeal as soon as possible.

A reason for appealing would be an extenuating circumstance under which you had no control and which you can document. The appeal should explain in detail the reason(s) for not meeting the standards progress.

Your statement for your appeal should consist of two parts:

1. In Part I, explain how the circumstances prevented you from meeting academic progress, indicating the problem has been resolved.
2. In Part II, clearly explain how you will be able to meet progress standards in the future. Provide relevant dates and supporting documents from appropriate third parties, such as an academic advisor, instructor, doctor, counselor, clergy, etc.

Appeal Categories

Mark the box that represents the reason for your appeal. Read and FOLLOW the instructions. Attach copies of supporting documentation, statements, or letters to support your Appeal. Include a detailed, written explanation stating the circumstances of your appeal. Only requests that include documentation can be considered.

ONE APPEAL PER ACADEMIC YEAR WILL BE CONSIDERED.

You must complete this section. This is part of your appeal request. Please check the appropriate box and provide the requested information in your statement.

- Death of an immediate family member** (immediate family member is a grandparent, parent, child, spouse, brother or sister). Other relatives such as uncles, aunts and cousins are not immediate family members.
- Part I. (CAUSE):** Explain the circumstances as to how their death affected your academic performance. Was this an unexpected death? Did their death occur during the semester you became deficient? What role did you play in their care? Were you the primary caregiver for this person and why was the reason you chose to be the caregiver? How long ago did the person die? Provide a photocopy of the death certificate, obituary notice or letter from the funeral home. Include in your statement the deceased's name, their relationship to you and date of death.
- Part II. (YOUR SOLUTION):** Please explain what you have done to resolve the problem that prevented you from successfully completing your required hours. Did you seek counseling to deal with the death? Did you make an effort to make up the deficiencies after this death? What steps have you taken to ensure you will complete the upcoming semester.
- Illness or injury.** You, your spouse, your dependent children, were injured or ill for an extended period of time. Explain at what time the injury or illness occur in relationship to your enrollment.
- Part I. (CAUSE):** Who was ill or injured? How long was this person ill or injured? What were the restrictions, if any? Why was this person (if this person was not you) unable to care for self while you attended classes? Provide medical records, bills or doctor's statement. Provide names and relationship to you of the person who was ill or injured.
- Part II. (YOUR SOLUTION):** What steps have you taken in case another illness or injury occurs to ensure you will be able to attend your classes and meet your academic obligations for the semester? Explain your plans in detail.
- Change in academic program.** You have changed academic programs. As a result, you have exceeded the maximum allowable semesters as per CPCC's Financial Aid's Standards of Satisfactory Academic Progress Policy. You must recognize that changing majors does not allow you extra time to graduate. The allowable number of terms remains the same irrespective of the additional time needed to complete the new degree requirements.
- Part I. (CAUSE):** Explain your reason for changing majors this late in your career. In your explanation, include how many hours from your previous major will not transfer into your new degree. How many hours do you still need to complete this new major? Submit a program evaluation for your previous and your new program of study.
- Part II. (YOUR SOLUTION):** Describe your plan of action. How many hours will you be enrolling this semester? List the courses you will be taking this semester. Include in your statement your anticipated graduation date.
- Extenuating circumstances.** You experienced an unusual situation which you had no control. This unusual situation is not one of the categories above. Automobile accident, automobile breakdown, marital conflicts are examples of extenuating circumstances.
- Part I. (CAUSE):** Explain the unusual situation and how it affected your studies. Include in your statement what actions did you take to successfully complete the classes (i.e., Did you seek tutoring? Why did you drop or fail the class?) When did you decide that you would drop the class or that you would fail the class?
- Part II (YOUR SOLUTION):** Describe your plan of action. What steps have you taken to solve your problems? Do you now have reliable transportation? Have you sought marital counseling or resolved problems?

Attach your support documents such as a letter from a professor, accident report, or marriage counselor, divorce attorney or copies of your repair receipts for your vehicle.

SECTION B

Please indicate the semester you are appealing to have your financial aid reinstated:

Fall 2008

Spring 2009

Summer 2009

Have you previously submitted an appeal? _____ If so, please give a brief statement in regards to your current appeal.

Please address all semesters in which you experienced academic problems.

Describe the actions you have taken to meet your responsibilities as a student during the time you experienced your mitigating circumstances.

Describe what changes will now enable you to meet the academic progress requirements in your next term of enrollment.

Personal Statement:

- Appeal Denied due to insufficient documentation. _____
- Appeal Denied due to completion rate. _____
- Appeal Denied due to grade point average. _____
- Appeal Denied due to grade point average and completion rate. _____
- Appeal Denied. Student must complete at least _____ credit hours without withdrawing from any courses, maintain a 2.0 GPA and resubmit appeal.
- Appeal Approved. Student must complete at least _____ credit hours without withdrawing from any courses and maintain a 2.0 GPA.

FINANCIAL AID APPEALS COMMITTEE: Committee Member:

APPROVED

DENIED

Comments: _____
