

Maximum Timeframe Appeal Form

Student Name _____

Student ID# _____

SSN: xxx-xx-____

I am requesting Financial Aid for: [] Fall or [] Spring or [] Summer Year: _____

According to Satisfactory Academic Progress guidelines, you are on financial aid suspension. You may appeal by completing this form with a "Restricted Course List" (RCL), evaluated program check sheets, and all academic transcripts, to the Financial Aid Office. Incomplete forms will be rejected. **Notification of the committee's decision will be delivered to your Student Center. Please allow at least 15 business days (may take longer during peak processing periods).** All Committee decisions are final.

Students may request to have their timeframe extended under the following circumstances:

- Program of study has changed from _____ to _____
- I am changing the current "Approved" RCL on file.
- I have transferred hours that do not apply to my program of study.
- I have an Associate's Degree and am pursuing a second degree or certificate.
- I have earned a Bachelor's Degree (or higher) and am pursuing another Degree or Certificate.
- I must take specific coursework in order to **enroll** in an eligible program (students requesting an extension under this requirement must be taking classes that are a prerequisite for admission to the program. Students meeting this Preparatory Course Work requirement are not grant eligible and may only be considered for loans during one consecutive 12 month period).

In order to be considered for federal financial aid, you must provide a detailed explanation as to why you have earned more credits than your degree/certificate program requires, why you have changed your program of study, requesting to change the current RCL on file, or, if you already have a degree, why you are taking additional coursework. _____

Student Signature: _____ Date: _____

THIS SECTION - OFFICE USE ONLY

Date _____	Committee initials _____	Effect: Fall/ _____	Spring/ _____	Sum/ _____
Approved _____	Disapproved _____	#Cr. attempt _____	#Cr. earned _____	CGPA _____
SAP code _____				
Approved with [] _____				
Stipulations: _____				

Your signature below acknowledges that you have READ & UNDERSTAND the above restrictions & recommendations.

 Student Signature Date _____