2017-2018 FINANCIAL AID SUSPENSION APPEAL FORM

Appeal Deadlines (subject to change):
Fall 2017 Semester deadline August 22, 2017
Spring 2018 Semester deadline January 4, 2018
Summer 2018 Semester deadline May 22, 2018 by 12:00 PM

Items required for submission with your financial aid appeal:

- Complete financial aid suspension appeal form. All pages must be fully completed in blue or black ink **(NO PENCIL).**
- Appropriate form of documentation to support your extenuating circumstances.
- Academic Plan—Academic plan needs to be for 3 semesters and begin with the semester for which you are appealing. If you are graduating in less than 3 semesters, the term in which you graduate must be noted on your plan.

NOTE: All appeals must contain the items specified above. Incomplete appeals will not be accepted and/or will be denied.

****PLEASE COMPLETE FORM USING BLACK OR BLUE INK ONLY****

_____ _____
Last Name First Name MI Student H#

_____
Address (include apartment # and PO Box) City State Zip

_____ _____
Phone Number (include area code) Student's WaveNet Email Address

_____ _____
Semester Which You Are Appealing Major (the semester you are appealing for)

PLEASE NOTE: Students that are submitting appeals are responsible for paying their tuition and fees by the payment deadline to avoid the cancellation of their courses schedule and/or late fees. Incomplete appeals will automatically be denied. The decision made by the SAP Appeals Committee is final.
Per Federal regulations a student may appeal his financial aid suspension on the basis of injury or illness, the death or a relative, or other special circumstances. In addition to this, the student is required to provide documentation to support the extenuating circumstance.

Extenuating or unusual circumstances with examples of appropriate documentation

PLEASE NOTE: Your extenuating or unusual circumstance must have occurred during the timeframe in which you did not meet Satisfactory Academic Progress requirements.

- ✓ Personal or immediate family illness
  - Signed and dated medical documentation must be provided.
  - Signed statement from a doctor on the practice's letterhead
- ✓ Disability
  - Signed and dated documentation by a doctor
  - Signed and dated documentation from disability services
- ✓ Immediate family member's death (parent, sister/brother, child, spouse, or grandparent)
  - Obituary with name of the student listed
  - Funeral program with the name of the student listed
  - Dated death certificate
  - Notarized statement from a family member whose name is listed on obituary or funeral program explaining the nature of your relationship to the deceased
- ✓ Tragic accident and/or event
  - Dated accident report
  - Dated police report
  - Dated medical report
- ✓ Natural Disaster such as hurricane, flood, earthquake, tornado, etc.
  - Dated FEMA approval documents
  - Dated and signed insurance reports
  - Documentation to show how student was personally affected
- ✓ Any other unusual occurrence that was 100% beyond your control-- divorce, custody battle, spousal abuse, etc.
  - Dated legal documents
  - Dated police reports
  - Dated medical reports

Items that are not considered an extenuating circumstance include the following:

- × Work related issues
- × Childcare problems
- × Transportation issues
- × Too many classes
- × Balancing school and family
- × Time management issues
- × Not liking the instructor
- × Bad advising
- × Difficult major
- × Any event that occurred before or after the terms in which you did not meet Satisfactory Academic Progress
- × Will do better next time
- × Not prepared for college
- × Immaturity or being young
- × Using extenuating circumstance more than once

I, _____, certify that I had an extenuating circumstance which led to my financial aid suspension. I have included all documentation of this circumstance and understand my appeal will be denied if it not provided.

Student Signature_____H#_____ Date_____

Use the space below for your appeal explanation (attach additional pages if needed). Your explanation MUST include the following items:

1. Explain the extenuating circumstances that prevented you from making Satisfactory Academic Progress. Your extenuating circumstances must have occurred during the timeframe in which you performed poorly.

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2. Explain what has changed in your situation that will allow you to make Satisfactory Academic Progress at the next evaluation.

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Student Signature_____H#_____ Date_____

Student Agreement: By submitting my HGTC financial aid appeal I am acknowledging the following to be true:

- ✓ I have read HGTC's Satisfactory Academic Progress Policy and I understand that it is my responsibility to stay informed of the SAP policies and to monitor my own standards of Satisfactory Academic Progress.
- ✓ I understand that I am responsible for checking my Financial Aid and SAP status on WaveNet.
- ✓ I understand that extenuating circumstances are required for financial aid appeals.
- ✓ I understand that the extenuating circumstances I experienced must have occurred during the timeframe in which I performed poorly.
- ✓ I understand that I cannot use the same extenuating circumstance more than once.
- ✓ I understand that my extenuating circumstances must be resolved or the situation must have changed to allow me to meet Satisfactory Academic Progress standards.
- ✓ I have attached all supporting documentation to this appeal and understand that without it my appeal will be automatically denied.
- ✓ I have met with my advisor and have attached my Academic Plan to this appeal.
- ✓ I understand that I must take the courses, in order, as listed on my Academic Plan
- ✓ I understand that I am responsible for paying my tuition in full and on time, regardless of financial aid or this appeal form.
- ✓ I understand that I am fully responsible for any late fees or charges I incur as a result of not paying my tuition in full or on time.
- ✓ I understand that I am also responsible for getting my classes reinstated if I am dropped from my classes.
- ✓ I understand the decision of the SAP Appeal Committee is subject to federal and institutional policies and their decision is FINAL.
- ✓ I understand that sitting out a term or taking multiple semesters off will have no effect on my SAP status. Paying for classes without financial aid will only change my eligibility if I am able to bring myself back into compliance will all SAP regulations

Student Signature_____H#_____ Date_____