Financial Aid Appeal Form

Student’s Name: ___________________________ Student’s ID#: __________________

Address: ________________________________________________________________

Phone: ___________________________ Email: __________________________________

Review the Satisfactory Academic Progress (SAP) Policy and Appeal Process outlined at www.perrytech.edu to determine if you are eligible to appeal for federal financial aid. If you wish to be considered for reinstatement of federal financial aid you must submit this form, your written appeal letter and any supporting documentation.

Section I. Reinstatement Request Type
Below please indicate which situation applies to your academic difficulty:

- Illness/Injury: If the illness of an immediate family member (parent, spouse, sibling, child or yourself) contributed to your lack of academic progress, please attach appropriate copies of medical records, doctors treatment etc.

- Death: If the death of an immediate family member (parent, spouse, sibling & child) contributed to your lack of academic progress, please attach appropriate copies of death certificate, obituary etc.

- Drug/Alcohol: If you had a health concern that contributed to your lack of academic progress, please attach appropriate copies of evaluations and completed treatment certificate/letter.

- Medical: If a personal medical problem (significant trauma in student’s life that impaired the student’s emotional, mental and/or physical health) contributed to your failure to maintain satisfactory academic progress, attach documentation from a medical professional from whom you have received advice or treatment.

- Military Service: If you have withdrawn due to military service, provide documentation.

- Other Circumstances: Please clearly state the circumstances (not listed above) in your appeal letter and provide appropriate documentation.

*Note: Circumstances related to the typical adjustment to college life such as working while attending school, financial issues related to paying bills and car maintenance/travel to campus are not considered as extenuating for purposes of appealing financial aid.

Section II. Appeal Results Student Acknowledgments

- If my appeal is DENIED, by signing below I understand that decisions are processed on a case-by-case basis and the committee may deny any SAP appeal. I also understand that the decision of the appeal committee is final.

- If my appeal is APPROVED, by signing below I recognize that I am expected to make academic progress within the term for which the appeal has been approved.

- I understand that if I do not meet these requirements I will be ineligible to receive financial aid and will be responsible for payments toward my student bill until I meet satisfactory academic progress standards.

________________________________________________________________________

Student’s Signature

________________________________________________________________________

Date

Rev. 2/2016