Use this form if your eligibility to receive financial aid has been suspended. You have an opportunity to appeal the Financial Aid suspension. Carefully read and follow the instructions below.

1. **Type and sign a detailed letter of appeal.** This letter should include and describe the following points:
   a. Extenuating circumstances that prevented you from meeting the Satisfactory Academic Progress (SAP) standards. Examples of extenuating circumstances include, but are not limited to:
      i. Death or serious illness or injury to an immediate family member
      ii. Extended hospitalization or medical condition of student
      iii. Victimization of a violent crime or natural disaster
      iv. Work related difficulties
      v. Other documented situations

Lack of transportation to school, or poor performance in class is **NOT** considered extenuating circumstances. Change of major is also not considered as extenuating circumstances. Appeal should not be based upon your need for financial assistance.

   b. Plan of action to resolve (or manage) the cause for the circumstance or unit-deficiency and explain how it will not cause problems in the future.

2. **Provide copies of supporting documentation** such as doctors’ letters/bills, death certificate, obituary, or police reports. Failure to provide adequate documentation will result in your appeal being denied.

3. **Submit your appeal, appeal form and supporting documents to the Office of Financial Aid.**

**AFTER SUBMITTING YOUR APPEAL**

Appeals must be submitted by the 1st day of the semester you plan to attend. Appeals are reviewed at the end of each semester after grades are posted. The review of your appeal may take longer during peak periods. You can track the process of your appeal on Self-Service, under Financial Aid documents. In-person appointments will not be granted and results/outcome is not communicated by phone. Appeals submitted after the deadline will be considered for the next semester.

During the review, some of the factors that will be considered are:

1. Validity of the reasons for failing to meet the standards.
2. Resolution of the problems leading up to your failure to meet the standards.
4. Prior academic history (credits earned vs. credits attempted, GPA, number of repeats, etc.).
5. Number of previous suspensions and reinstatements.
6. Your demonstrated motivation to succeed and likelihood of future success.
7. Quality and thoroughness of appeal and supporting documentation.

Only complete appeals will be reviewed. All appeal decisions are final and not subject to further review. The decision can not be appealed. Do not rely on the success of your appeal for tuition payment. Financial Aid suspension will only prevent financial aid disbursements to your student account and does not affect any other services on campus. **Your appeal is denied until approved and you are responsible for your charges for the semester.**

If your appeal is approved, reinstatement does not guarantee an award. We will award you with the funds you are eligible to receive. You are not guaranteed replacement of any previously awarded funds. You will be placed on Financial Aid Probation with conditions that may be required to gain aid eligibility.

The Office of Financial Aid will not make copies of original documents. Please bring your own copies to submit.
Appeal of Financial Aid Suspension

Student’s Name: ___________________________ Student ID: 02

Email Address: ___________________________ @ stillman.edu Phone: ________________________

1. Semester for which you are submitting the appeal for (dates to file):
   - ☐ Spring 2022 (Jan. 6)
   - ☐ Summer 2022 (May 25)
   - ☐ Fall 2022 (Aug 18)

2. Please indicate the extenuating circumstances that have contributed to your inability to maintain SAP by checking the best category that applies to you. You also must follow the instructions for each checked category.

<table>
<thead>
<tr>
<th>Extenuating Circumstances</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Serious illness or injury to student or immediate family member (parent, spouse, sibling, child) that required extended recovery time. Attach a statement from the physician on letterhead explaining the nature and dates of the illness or injury and a release to return to classes.</td>
</tr>
<tr>
<td>☐ Death of an immediate family member. Attach a photocopy of the death certificate or obituary and include the name of the deceased and relationship to you.</td>
</tr>
<tr>
<td>☐ Significant trauma in student’s life that impaired the student’s emotional and/or physical health. Provide a detailed explanation regarding the specific circumstances of your condition. Include dates and what you have done to overcome this condition. Supporting documentation from a third party (physician, social worker, psychiatrist, police, etc.) also must be attached.</td>
</tr>
<tr>
<td>☐ Victim of a crime. Attached copy of police reports of incident.</td>
</tr>
<tr>
<td>☐ Work-related difficulties. Attached statement from employer explaining the student’s specific work related difficulties, timeframe of the difficulties and how the situation has changed to such an extent that it should not significantly impair future academic performance.</td>
</tr>
<tr>
<td>☐ Other unexpected documented circumstances beyond the control of the student. Please explain in detail the nature and dates of the unexpected circumstances. Supporting documentation also must be provided. If appealing for maximum eligible timeframe, you must provide a letter on letterhead from your advisors that contains your remaining classes (including the number of credit hours and your expected graduation date).</td>
</tr>
</tbody>
</table>

4. Supporting Documents:
   - ☐ Included
   - ☐ Not included. I will submit to the office at a later date (before the deadline).

By signing this form, I certify that I read both pages of this form, that all supporting documentation needed for my appeal is attached, and that the information provided and all supporting documentation is true and accurate. Falsified documentation will result in an immediate denial of your appeal. Future appeals may also be denied as well.

______________________________  ________________________________
Student Signature                      Date

For Office Use Only

Judge 1  ☐ Approve  ☐ Denied       Final:  ☐ Approve  ☐ Denied
Judge 2  ☐ Approve  ☐ Denied       Probation for  ☐ 1  ☐ 2  ☐ 3  ☐ 4
Judge 3  ☐ Approve  ☐ Denied       Probation Requirement:

______________________________  ________________________________
Financial Aid Representative             Date