

STUDENT NAME: _____

STUDENT ID#: _____

2019– 2020 FINANCIAL AID APPEAL FORM

Instructions: Complete all items outlined below before submitting this appeal form to the Office of Financial Aid. Be thorough, as the information provided on this appeal will determine your eligibility to receive financial aid at Los Medanos College. The appeal process may take up to eight weeks depending on the volume of appeals. **Failure to submit all documentation or comply with all terms of the Contra Costa Community College Satisfactory Academic Progress (SAP) Policy will result in an appeal denial.** Students will be limited to submitting one (1) appeal per semester. **All decisions made by the Appeal Committee are FINAL.**

Reason for Appeal:	Term (Check ONE)	Appeal Deadline Date (No Exceptions)
<input type="checkbox"/> Maximum Time Frame Suspension (Attempted more than 150% of the maximum units required for completion of my declared major).	<input type="checkbox"/> Fall 2019	November 4, 2019
<input type="checkbox"/> Financial Aid Academic/Progress Suspension (Cumulative GPA below 2.0 and/or progress completion below 67%).	<input type="checkbox"/> Spring 2020	April 13, 2020
<input type="checkbox"/> Earned a Bachelor’s Degree or higher (Eligible for loans only).	<input type="checkbox"/> Summer 2020	July 13, 2020

- Complete the “**Understanding Satisfactory Academic Progress (SAP) and the Financial Aid Appeal Process**” online session at <http://losmedanos.get-counseling.com/flag-session/19736>.
- Provide a **Personal Statement** that addresses the following key points:
 - Explain your extenuating circumstances, which made it difficult for you to meet Satisfactory Academic Progress requirements (circumstances beyond the student’s control). You must attach **supporting documentation** to this appeal form (i.e. doctor’s statement, police report, death certificates, and other documents pertaining to your circumstances). **Failure to do so will result in an automatic denial of your appeal.**
 - Explain your resolution to your extenuating circumstance. What steps have you taken (or are you planning to take) to help you meet satisfactory academic progress in the future?
- For Maximum Time Frame (MTF) Suspension ONLY:**
 You must meet with an academic counselor and have the second page of this appeal form completed. All MTF students must have a **Comprehensive Educational Plan (CEP) completed and archived by a counselor on InSite**. Your CEP must include the courses you are enrolled in for the current semester and reflect only the courses that are required to complete your program of study. If you do not have a **current CEP**, you must schedule a **one-hour appointment** with an academic counselor. If a CEP cannot be found by the Appeal Committee on InSite, your appeal will be considered **incomplete/denied**.

PLEASE READ AND INITIAL NEXT TO EACH STATEMENT.

- _____ I acknowledge that I have read and understand the CCCCD SAP Policy.
- _____ I understand that I am ineligible for financial aid unless my appeal is approved.
- _____ I certify that I have completed all of the requirements outlined above BEFORE submitting my appeal packet to the Office of Financial Aid.
- _____ I understand that further documentation may be requested by the committee if needed to reach a decision.
- _____ I understand the appeal process can take between 6-8 weeks, and I will be notified of the decision via InSite email.
- _____ I understand that if my appeal is approved, I must maintain at least a 2.0 GPA and complete at least 67% of all units attempted cumulatively.

I CERTIFY THAT ALL STATEMENTS AND /OR SUPPORTING DOCUMENTATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

STUDENT’S SIGNATURE: _____

DATE: _____

COUNSELING: PLEASE COMPLETE THIS FORM FOR MAXIMUM TIME FRAME STUDENTS ONLY

NOTE TO COUNSELOR:

- Student must have a **Comprehensive Educational Plan (CEP)** completed and archived on InSite.
- Student's CEP must include courses the student is enrolled in for the current semester and remaining courses required to complete his/her program of study.
- Student should only enroll in courses included on the educational plan. A student will not be funded for courses not included in the educational plan/required for the declared major.

1. **Declared LMC Major:** _____

2. **Student's educational goal at LMC:**

_____ Transfer to 4-year college w/ Associate Degree

_____ Transfer to 4-year without Associate Degree

_____ Earn Associate degree in General Education and/or Vocational Subject

_____ Earn Certificate of Achievement

3. How many units does the student have remaining to complete his/her educational goal at LMC (include current semester)? _____

4. When is the student's expected graduation date/last semester at LMC (indicate semester and year)? _____

COUNSELOR COMMENTS:

COUNSELOR (PRINT NAME): _____

COUNSELOR SIGNATURE: _____ **DATE:** _____

OFFICE OF FINANCIAL AID USE ONLY

TYPE OF APPEAL: _____ MTF (MAXIMUM TIME FRAME) _____ ACADEMIC/PROGRESS SUSPENSION

SAP ONLINE SESSION COMPLETED: _____

APPEAL DECISION AND COMMENTS: _____

_____**APPROVED** _____**DENIED** **APPEAL COMMITTEE MEMBER:** _____

_____**APPROVED** _____**DENIED** **APPEAL COMMITTEE MEMBER:** _____

_____**APPROVED** _____**DENIED** **APPEAL COMMITTEE MEMBER:** _____

NOTIFIED VIA EMAIL _____ **FA STAFF** _____