Completed Financial Aid Appeal Forms will be accepted and reviewed:

August 24 – September 10, 2015.*

(If you are aware that you will be in Unsatisfactory Academic Progress after summer-15 grades are posted, you can submit your appeal form early. Remember, you are responsible for being aware of your academic progress on the classroom)

*Financial Aid Appeals received on or after September 11, 2015 will be reviewed in date order, but if they are approved, it will be for winter 2016.
Financial Aid Appeal Form

Last Name: __________________________________________ First Name: __________________________________________

SSN#____________________________________ Daytime Phone #_____________________________________________________

E-Mail Address: ____________________________________________

**Notes to Student:** Financial Aid is NOT awarded retroactively for a prior term in which your Satisfactory Academic Progress was “Unsatisfactory”. *Don’t forget to do your Student Success Plan too.*

**Definition of Extenuating Circumstances:** Per Federal Regulations, extenuating circumstances are defined as: Appeals may be granted for students who fail to complete their courses because of injury or illness, the death of a relative, or other special circumstances which fall beyond the student’s control. **Documentation Required.**

**Circumstances which are not considered extenuating are:** Incarceration, poor choice of classes, poor progress due to employment obligations, personal problems involving moving, childcare, relationship issues, loss of roommate, transportation difficulties and other similar problems.

**Documentation:** Appropriate documentation of your extenuating circumstances must accompany this appeal. Examples of appropriate documentation include notes from a Health Care Provider(s), counselors and social workers. Police Reports, death notices and court reports may be used to document your circumstance. **Notes from family members and friends do not constitute adequate documentation.**

1. In your own words explain why you did not achieve the required credits and/or grade point average. *(Be specific. Attach documentation and extra sheet if necessary)*

________________________________________________________________________

________________________________________________________________________

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2. Indicate what actions you plan to implement to prevent or correct this situation in the future at LBCC. *(Attach extra sheet if necessary)*

________________________________________________________________________

________________________________________________________________________

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________________________________________________________________________

Student Signature __________________________________________ Date ___________________________
This Section for Financial Aid Office Only

☐ Appeal Approved _______  ☐ Appeal Denied  ☐ Appeal Requirements Met
☐ Restricted Approval  ☐ Appeal Requirements NOT Met
S U F W SP Yr _______  ☐ Appeal Tabled (needs more info)  ☐ Tabled Date: __________

Recommendations:

☐ Student must satisfactorily complete 100% of attempted credits per term with a quarterly GPA of 2.00 [C Average] or better.

☐ Student must raise cumulative completion rate of 70% with a cumulative 2.00 GPA before being reinstated.

☐ Comments: __________________________________________________________

Financial Aid Advisor Signature  (Date)  Financial Aid Director or Assistant Director of FA  (Date)
Student Success Resource Recommendations

(to be filled out by Advisor, indicating recommendations for this student’s success)

Student Name ____________________________  ID # _____________________
Program of Study __________________________  Date: ____________________
Primary Advisor: __________________________

Advisor Recommendations:

___ Use Learning Center resources (WH, 2nd floor; Lebanon Center; Benton Center)
   ___ Tutoring  ___ Writing Help Desk  ___ Math Help Desk
   ___ Math Angle  ___ Study Skills Zone  ___ Study in Learning Center
   ___ Disability Services (RCH 105)
   ___ Retake placement test (RCH 111)  ___ Math  ___ Reading  ___ Writing
   ___ See a counselor in the Career and Counseling Center (Takena Hall, first floor)
   ___ Access Career Information System - CIS in the Career Center (Takena Hall, first floor)
   ___ Follow-up appt with ____________________________, on ______________, at _________

Comments or Additional Notes: ___________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

_______________________________ _________________________________________
Student Signature     Signature of Academic Advisor approving this plan

_________________________________________
Please print advisor’s name

Linn-Benton Community College is an equal opportunity educator and employer.          i:kc advising 2.11.2014
### Computerized Placement Test Results:

Please circle the class level you placed into.

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**Comments:**

__________________________  Updated: 11/7/2012