

**MILES COMMUNITY COLLEGE  
FINANCIAL AID OFFICE**

**FINANCIAL AID SUSPENSION APPEAL FORM**

**Name:** \_\_\_\_\_

**MCC ID Number:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

Major/Program of Study: \_\_\_\_\_ Anticipated Grad date: \_\_\_\_\_

Term you wish to return: Fall Spring Summer Year of return: \_\_\_\_\_

Is this your first SAP appeal? Yes or No If no, when was your last appeal? \_\_\_\_\_

**Important information:** In order to regain financial aid eligibility, you must appeal your suspended Satisfactory Academic Progress (SAP) suspension. Submitting an appeal does not guarantee approval and appeals submitted without all required documentation, will not reviewed. Federal regulations require that all students meet SAP standards to remain eligible for financial aid.

Appeal Processing Guidelines

- Appeals must include a personal statement and supporting documentation.
- **Personal statement should address both, why you failed to meet SAP standards and what has changed in your situation, include what actions you plan to take to ensure that you will meet SAP standards in the future.**
- An incomplete SAP Appeal will not be reviewed and/or may be denied.
- Additional supporting documents may be requested for appeal to be processed.
- Students must be enrolled in the term for which they are seeking aid.
- Students will remain responsible for college charges regardless of appeal outcome.
- Submitting an appeal does not guarantee approval of financial aid eligibility reinstatement.
- The deadline to submit an appeal to regain fall financial aid eligibility is **November 1**. Appeals for spring eligibility must be received by **April 1**. Appeals for summer eligibility must be received by **June 25**.

Reason for Appeal (check all that apply)

- My cumulative grade point average is below 2.0
- My cumulative completion ratio is below 67%
- My total number of attempted credits will soon or has reached the Maximum Time Frame, of 150% of program length.

Every SAP appeal must also include supporting documentation that will validate your unusual circumstance(s).

Some examples of unusual circumstances follow, along with examples of appropriate documentation. Your personal statement must include specific details of your circumstance, while your required documentation supports the details.

<b>Circumstance</b>	<b>Supporting Documentation</b>
Mental or physical illness or injury to the student of immediate family member	Letter from physician, police report, or other professional statement that specifies date range and illness/injury
Death of a family member or significant person	Copy of an obituary or death certificate
Other unusual circumstances beyond the student's control	Written statement from an attorney (on law firm letterhead), professional advisor, or other professional third-party individual who can attest to the situation
Maximum Credits	Completed scope & sequence form for major signed by advisor.

Please read and acknowledge that you understand and agree to the following:

1. I understand submission of this appeal is only a request and does not guarantee financial aid eligibility reinstatement.
2. I understand I am currently not eligible for financial aid and I am responsible for all college charges.
3. I understand that if my appeal is approved, I must follow the conditions that are established by the Financial Aid Office.
4. I understand that I cannot re-appeal for the same circumstance if I fail to meet the conditions of my approved appeal.
5. I understand that I am only eligible to appeal once for max credits. If I have to deviated from my academic plan, I will need to submit an amended plan signed by my advisor.
6. I understand that my appeal will not be processed until all documentation has been submitted and that review can take up to three weeks.
7. I understand that must be enrolled for the term for which I am seeking aid.
8. I have read, understand, and will follow MCC's SAP Policy, [SAP Policy](#).

By signing below, I acknowledge that I have read and understand the information on this form, including the statements above. I certify that all information submitted with my appeal is true and correct. I will provide additional information if requested by the MCC Financial Aid Office.

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Signature

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Date