

Evergreen Valley College – Financial Aid Office

3095 Yerba Buena Road San Jose, California 95135 (408) 270-6460

APPEAL FOR FINANCIAL AID REINSTATEMENT (FEDSAP & MAXSAP)

Fall 2019

<i>Financial Aid Office use only:</i>	
Completion %:	_____
GPA:	_____
Total (UG) Units Attempted:	_____
Degree (CAGPA) Applicable Units:	_____

WE ASK THAT YOU PLEASE TYPE YOUR APPEAL RESPONSES

Date:

Name:

Student ID:

E-mail:

Phone:

In accordance with federal regulations, you may appeal for financial aid reinstatement if you have been disqualified as a direct result of extenuating circumstances. **You must provide written documentation and/or proof of the extenuating circumstances.**

The Financial Aid Appeals Committee will determine either to approve or deny your appeal for reinstatement based on your academic history, educational plan, class schedule and your response to the questions below. You will be notified by mail of the decision.

****If you choose to submit this appeal, you will not be able to submit another FEDSAP & MAXSAP appeal in the future.****



DEADLINE TO SUBMIT: OCT 11TH, 2019

TO SUBMIT AN APPEAL YOU MUST:

- BE REGISTERED FOR CLASSES FOR Fall 2019 AND
- HAVE A COMPLETED 2019-2020 FINANCIAL AID FILE

Appeal Instructions

- Submit this completed appeal form and a copy of your Comprehensive Educational Plan developed by an EVC Academic Counselor to the Financial Aid Office.
- If you have been accepted into our Nursing Program, you do not need to submit an educational plan. However, your class schedule must show you currently enrolled in nursing courses for this appeal to be reviewed.

1. What is your current major?

2. Did you change your major? Yes No

3. What is your academic goal? Certificate AA/AS Degree
 Transfer to a four-year university

4. Are you enrolled in the EVC Nursing Program? Yes No

You are disqualified from financial aid because you have attempted more than 150% of units required for your declared major/academic program on file with Admissions & Records, and you have completed less than 67% of units attempted or have less than a 2.0 GPA.

Please note: We exclude up to 30 units of remedial course work attempted, and all ESL courses attempted from the 150% calculation. Therefore, ESL or required remedial course work completed should not be the reason you have reached the maximum timeframe allowed for your program.

5. Describe in detail the extenuating circumstance that prevented you from completing all of your classes with a grade C (or CR) or better. Attach a separate sheet if you need more room. . Please provide proof of the extenuating circumstances, if available.

6. Explain how your situation has changed and the specific steps you will use to improve your academic performance. Attach a separate sheet if you need more room.

7. Why do you need more time to complete your educational program? You may attach an additional sheet if you need more room.

Message to student: By signing this form:

- I understand that if my Appeal for Reinstatement is approved, the disbursement date will be delayed by 3-5 weeks from the start of the Fall 2019 semester or from the date of submission, whichever is later.
- I certify that all the information on this form is true, complete and accurate.

Student's Signature _____ **Date** _____

~Financial Aid Appeals Committee Section~

<input type="checkbox"/> APPROVED <i>(circle all that apply)</i>	<input type="checkbox"/> DENIED <i>(circle all that apply)</i>
AA1 AA2 AD1K	AD1A AD1B AD1J AD1M AD1P AD1C
Supplemental: AA5 AA6 AA7 AD2	

Additional comments to print on letter: _____

1st Committee Member Signature _____ 2nd Committee Member Signature _____ Date _____