



### Priority Registration/CA Promise Grant Appeal

This form is to appeal the loss of your Priority Registration and/or loss of CPG eligibility

Name:

Student ID#:

Email:

Phone:

**Please read appeal instructions carefully:** You are choosing to submit this appeal because your current Academic Standing is Probation 2, which means you have lost your Priority Registration and CPG eligibility for the current or next semester. If your reason for not earning minimum academic standards is listed in one of the categories below, you may appeal your status to regain your Priority Registration and CPG eligibility.

**Please note: Approval of a "Priority Registration" appeal, extends to the loss of CA Promise Grant.**

**PLEASE INCLUDE A TYPED 1 PAGE RESPONSE TO THE FOLLOWING:**

I have not met minimum academic standards during my past semesters at SJECCD because...

**SUBMIT THIS APPEAL FORM & SUPPORTING DOCUMENTATION INTO THE COUNSELING OR FINANCIAL AID OFFICE AT THE CAMPUS YOU ARE ATTENDING.**

**I am appealing the following:**

- Loss of Priority Registration only
- Loss of CA Promise Grant only
- Both

**I am appealing the loss of CPG because: (please check one reason from options 1-6)**

- 1. I was unable to obtain essential support services. (Please provide a written statement)
- 2. I would like to be granted special consideration as I am a student in one of the college's support programs. State which program and attach written verification from each program to your Appeal form.  
Program: \_\_\_\_\_
- 3. I have had a significant change to my economic situation

**I am appealing the loss Priority Registration because: (please check one reason from options 4-6)**

- 4. I am on Academic/Progress Probation due to Extenuating Circumstances that were beyond my control: verified illness, accident, etc. (Examples of documentation are doctor's notes, accident report, birth/death certificates, etc.)
- 5. I have been making significant academic improvement by completing my last semester with a 2.00+ GPA and completed more than 50% of my semester coursework. (Provide unofficial transcript)
- 6. I experienced other circumstances that were beyond my control as a student. (Attach documentation verifying those circumstances).

I declare under penalty of perjury that all information on this form is true and correct.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

|   |                            |   |
|---|----------------------------|---|
| <b>Official use only:</b>                     | <b>Semester:</b> _____     | <b>Received Date:</b> _____             |
| Committee Recommendation:                     | Approve _____ Denied _____ | Semester GPA _____ Cumulative GPA _____ |
| Support Services/Follow up Recommended: _____ |                            |   |
|   |                            |   |
| Committee Member Signature:                   | _____                      | Date: _____                             |
| Committee Member Signature:                   | _____                      | Date: _____                             |