The following items explain the requirements that must be adhered to if the student is appealing financial aid suspension status:

1. Read the College’s Satisfactory Academic Progress Policy, which was provided with your original award offer. After you have read the entire document, and you still feel you have a reason(s) to appeal your financial aid suspension, please continue.

2. Complete, in detail, the reverse side of this page, giving your extenuating reason(s) for appealing. Use a separate sheet of paper if necessary.

3. You must provide supporting documentation that will, without question, validate your reason(s) for not successfully meeting minimum financial aid academic progress standards.

4. Failure to adequately explain your reasons and failure to submit appropriate documentation will lead to a denial of your request.

5. This appeal form should be submitted within 30 days after you receive the suspension notification letter. Supporting documentation must be attached to this form.

6. Financial Aid Staff will make a decision based on the information submitted. Failure to submit this appeal form and/or failure to submit supporting documentation will result in denial of the appeal request. The decision of the Financial Aid Office is final and there will be no appeal of the decision.
Dear Financial Aid Office:

I have been placed on Financial Aid Suspension for not maintaining financial aid satisfactory academic progress completion rate requirements.

I have an extenuating circumstance(s) that I will explain below and verify with additional documentation. I request that you review my status and notify me of your determination of my appeal.

Reason for request:

______ Death of a family member (attach a copy of the death certificate, obituary, or announcement).

______ Hospitalization or severe illness (attach medical documents which document you could not complete your enrollment or maintain a 66% completion rate.)

______ An incapacitating accident (attach police report and doctor's statement).

______ Other: __________________________________________________ (attach documentation).

** DOCUMENTATION MUST BE ATTACHED TO THIS REQUEST**

Explain the circumstance indicated above and how it prevented the successful completion of your course(s). Use additional pages if needed.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

I understand that any false or misleading information could result in the loss of all financial assistance eligibility at Oklahoma City Community College and certify that all information provided in this appeal request, including supporting documentation, is true and correct.

Signature: ____________________________ Date: _____________________

REV. 01/08