WALLACE STATE

2024-2025 Financial Aid Appeal Form Satisfactory Academic Progress Appeal

Student's NameE-mail address		Student's "A" Number			
		Student's Cell Phone			
Declar	ed Major:	Semester appeal to begin:			
*Con iPhon	aplete appeals with advisor signature and c es and Android phones have apps that allo	documentation may b ow users to scan docu	e emailed to <u>karen.</u> ments for easy ema	downs@wallacestate.iling and uploading.	<u>edu</u> .
	Financia	al Aid Appeal Dea	adlines		
	FALL 2024 OPEN ENROLLMENT/ MINI I	8/12/2024	Mini II	10/11/2024	
	SPRING 2025 OPEN ENROLLMENT/ MINI I	01/06/2025	MINI II	03/03/2025	-
	SUMMER 2025 OPEN ENROLLMENT/ MINI I	05/15/2025	Mini II	06/30/2025	
•	Federal regulations require students to ma hours earned, and maximum time limit—twww.wallacestate.edu/financialaid. GPA must equal a 2.0 Students must pass 67% of Students may only receive It is the student's responsibility to stay info Aid Information at "My Wallace State." Students who fail to meet SAP will be no receive aid due to insufficient academic p Submission of an appeal is NOT an autinformation provided on this form after the in email form of this determination.	f all classes they st aid on up to 150% ormed of the SAP stand tified by the financial progress on "My Walla comatic approval for	cart of their Degree lards and to monitor aid office if they ar ace State." financial aid. Stud	Program their own progress on re out of compliance a ents will be notified fr	their Financial and not eligible to rom the
	tatement Request Type please indicate which situation applies to you Medical: If a personal medical problem of documentation from a medical profession. Death/Illness: If the death or illness of an attach appropriate copies of medical recor Military Service: If you have withdrawn Second Undergraduate Degree: If you h your expected graduate for the second deg Other Circumstances: Please clearly state	ontributed to your failt al from whom you have immediate family mends, death certificate, of due to military service have attempted more the gree in your letter. You	are to maintain satisfied received advice or mber contributed to poituary etc. In provide documentation in 150% hours due in must have gradua	treatment. your lack of academic ation to working on a second ted with first degree.	progress, please

documentation.

Note: Circumstances related to the typical adjustment to college life such as working while attending school, financial issues related to paying bills and car maintenance/travel to campus, are not considered as extenuating for purposes of appealing suspension of financial aid.

Directions for submissions:

- Do NOT discuss your **need** for financial aid as part of your rationale for reinstatement of Title IV Federal Financial Aid. It is assumed by the Financial Aid Appeals Committee that any student filing an appeal is doing so based upon financial need.
- Students cannot appeal a prior balance owed as a result of an early withdrawal or a Return of Title IV balance owed.
- Incomplete applications will receive an automatic denial
- A detailed letter of explanation. Please make sure to address the specific semesters where you experienced academic
 problems or withdrawals. Include what actions you took to make an effort to meet your responsibilities during the time of
 your mitigating circumstances and how your circumstances have improved.
- **Proof** that the event you described occurred. (Statement from your physician, medical bills, police report, obituary, etc.) Proof should support the circumstances in the letter and the terms on transcript in which circumstance occurred.
- **Degree Works from your My Wallace State account** showing the courses you must take to graduate from WSCC with your declared major. Once you have discussed this with an advisor both of you must sign the Degree Works. Appeals turned in without both a student and Advisor's signature will be an automatic denial.

Appeal Results Student Acknowledgments

- If **DENIED**: by signing below I understand that decisions are processed on a case-by-case basis and the committee may **deny** any SAP appeal. I also understand that the decision of the appeal committee is final.
- If **APPROVED**: by signing below I recognize that I am expected to make academic progress as detailed.
 - o taking at least 6 hours of classes
 - o pass all courses with a "C" and no withdrawals
 - o **only** register for courses that are in my Educational Plan that was submitted with Financial Aid Appeal. Additional courses or program changes are not allowed.

Signature:		Date:	
Advisor Signature:		Date:	
Projected Graduation Dat	e:		
KEEP A COPY FOR YO	UR RECORDS		
Submit completed do	cuments at Lion Central, ema	nil to karen.downs@wallacestate.edu or mail to:	
	Community College		
Financial Aid C	Office		
P.O Box 2000			
Hanceville, AL	35077-2000		
FOR OFFICE USE O	ONLY		
Hours Attempted	Hours Completed	GPA:	
Major change:			
Appeal Committee App	proved Denied Den		
Recommendation			
FA Official Signature		Date	

The Free Application for Federal Student Aid (FAFSA) is the only form that a student is required to complete to be considered for student assistance from any of the Title IV, HEA programs. No additional application or other request for information can be required by an institution in support of the student's request for Title IV, HEA program assistance, except for information needed to ensure the student's eligibility for such assistance (e.g., information needed to complete verification or to demonstrate compliance with the student eligibility provisions of the HEA and the regulations).

Wallace State Community College prohibits discrimination based on the grounds of sex, sexual orientation, gender identity, part- or full-time status, disability, age, race or national origin, be excluded from participation in, be denied the benefits of, any educational program or activity.