

**FINANCIAL AID APPEAL APPLICATION**

**Appeal for Reinstatement of State/Institutional Aid or Repayment of Bright Futures Due to Extenuating Circumstances**

If you did not meet the requirements for federal, state or institutional scholarship/aid programs, you may fill out this Financial Aid Appeal Application. You may also fill out this application if you are requesting repayment forgiveness for Bright Futures funds returned due to withdrawal from classes. **You may submit this Appeal Application only if extenuating circumstances beyond your control prohibited you from meeting the renewal requirements for the scholarship/aid program in question. CAREFULLY READ THE ATTACHED APPEAL INSTRUCTIONS (page 4) AND EACH SECTION BELOW.** The Appeal Application must be received by the Office of Financial Aid no later than 30 days from the date of the ineligibility notice that was sent to you, or the appeal will be denied. See also University policy FPUh 7.0021P Financial Aid Appeals.

**Applicant Information**

**Full Name / Student ID:** \_\_\_\_\_  
*Last* *First* *Student ID*

**Address:** \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_

*City* *State* *ZIP Code*

**Phone:** (      ) \_\_\_\_\_ **Email:** \_\_\_\_\_@flpoly.org

**Scholarship/Aid Program**

Select the scholarship/aid program you wish to submit an appeal for. You may select multiple programs to appeal so long as the extenuating circumstances apply to each scholarship/aid program. If you are appealing the repayment of Bright Futures for withdrawal from classes please check this box  and indicate the semester you withdrew from your classes \_\_\_\_\_.

**University Scholarships:** Scholarships awarded to students from institutional funds.

- Florida Poly Inaugural Scholarship
- Florida Poly President's Scholarship
- Florida Poly Need Based Scholarship
- Other \_\_\_\_\_

**Florida Bright Futures:** Scholarships awarded to students from state funds.

- Florida Academic Scholarship
- Florida Medallion Scholarship

**Need Based State Programs:** Scholarships awarded to students from state funds.

- Florida Student Assistance Grant
- Other: \_\_\_\_\_

**Federal Student Aid:**

- Federal Pell Grant, Direct Loans, Supplemental Educational Opportunity Grant, Federal Work Study

CERTIFICATION: I certify the information on this Administrative Appeal, my written statement/letter, and any supporting documentation submitted is accurate, true and complete to the best of my knowledge. I will provide other information as requested by the Office of Financial Aid. I understand that if I submit any false information, such may be cause for the denial, reduction, and/or repayment of student financial assistance. My appeal statement/letter is attached along with all the necessary documentation to support my appeal.

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

**Office of Financial Aid to Complete (student leave blank)**

Applicant's Name: \_\_\_\_\_

Date Appeal received in Office of Financial Aid: \_\_\_\_\_

**Academic Advising (to be completed by program coordinator or academic advisor)**

1.) Remaining credit hours needed to complete degree requirements (including current semester): \_\_\_\_\_

2.) Overall GPA: \_\_\_\_\_ 3.) Expected Graduation: \_\_\_\_\_

4.) Classes in which the student is currently enrolled (please indicate if required for graduation):

Course	Required	Course	Required
_____	Y/N	_____	Y/N
_____	Y/N	_____	Y/N
_____	Y/N	_____	Y/N

5.) Academic Advising Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature-Academic Advisor/Program Coordinator**

\_\_\_\_\_  
**Printed Name** **Date**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Phone Number** **Email**

**Financial Aid Appeals Committee (student leave blank)**

Approved:	Denied:	Inconclusive:
Comments:		

\_\_\_\_\_  
**Signature (Appeals Committee Chair)**

\_\_\_\_\_  
**Date**

Financial Aid Office to complete:

Date copy of the decision emailed to the applicant: \_\_\_\_\_

## Appeal Instructions

Below is a list of steps that you should take to submit an appeal for reinstatement of your scholarship/aid award. The Financial Aid Appeals Committee will review appeals in the order they are received. Appeals Applications with **incomplete** documentation will be deemed Inconclusive and will be placed in pending status for 30 days; if documentation is not received by the Office of Financial Aid within the 30 day period, the appeal will be Denied.

1. To appeal a decision that you are ineligible for a scholarship/aid program, you must submit a **signed, typewritten letter** or **statement** that summarizes the extenuating circumstances that contributed to the decline in your academic performance. Please indicate which semesters or terms you are appealing and for which year the appeal is for. You must clearly describe:
  - a. The extenuating circumstances that took place,
  - b. A timeline of the circumstances indicating when they started and how long they continued,
  - c. How the extenuating circumstances negatively impacted your academic performance,
  - d. The pertinent details of the event, and
  - e. Measures you have taken to change the circumstances that transpired in order to prevent the problem or issue from interfering with your academic performance in the future.
2. You must also attach **additional documentation** supporting your letter/statement and appeal. Documentation must be submitted with the Appeal Application. Documentation may include, but is not limited to, one or more of the following:
  - f. A signed and dated statement from a medical professional (doctor / physician) on letterhead stating the circumstances and timing of an illness or incident that contributed to the decline in your academic performance.
  - g. A signed statement from a mental health professional indicating the impact that an illness or incident had on your academic performance.
  - h. A signed statement from a relative or family member describing events that constituted a family emergency, illness or medical emergency. In addition, you must also provide at least one other statement signed by a separate non-related third party.
  - i. A signed statement from a medical or academic professional documenting what steps you have taken that will allow you to successfully move forward.
  - j. Official reports issued by either police, insurance companies or court documents describing an event or occurrence.
3. You must complete and attach an academic plan that you created with the program coordinator for your degree program or your academic advisor. The academic plan should provide a plan of work that you have been advised to enroll in to meet the areas of academic performance that you have been unable to complete satisfactorily for the scholarship you are appealing. Repayment of Bright Futures appeals does not require an academic plan.
4. You must submit a completed Appeal Application along with your statement, supporting documentation, and academic plan (if applicable) to the Office of Financial Aid before your appeal will be submitted to the Financial Aid Appeals Committee for review.