

Briar Cliff UNIVERSITY

the catholic franciscan learning place

Financial Aid Office Financial Aid Appeal Form 2018-2019

Students wishing to appeal a financial aid decision must complete this form and return it to the Financial Aid Office. Appeals, **including all supporting documentation**, must be submitted according to appeal deadlines listed below in order to receive funding for that term. The Financial Aid Appeals Committee meets once a semester during the academic year. Incomplete petitions will not be reviewed. **Requests to reinstate aid for a semester that has ended, cannot be honored.**

Name _____

Social Security # _____ Current Phone # _____

Current
Address _____
City State Zip

(This is where we will mail the results of the appeal).

Request Aid Reinstated For:

Fall 18 _____ Spring 19 _____

Please check the reason you are completing this appeal and follow the appropriate directions on the reverse side.

_____ **Hour Deficiency, Completed less than 70% of Hours Attempted.**

_____ **Low Grade Point Average. (Less than required according to Standards of Academic Progress).**

_____ **Exceeded Maximum Hours for Degree Completion.**

Other _____

Reason For Appeal: (Please Type or Print) Remember to attach all appropriate documentation.

1. **What were the circumstances that prevented you from meeting the standards? Explain how this affected your academic performance.**

2. **What is your plan to resolve the problem (s)?**

Signature _____

Date _____

**Return to: Briar Cliff University
Financial Aid Office 3303
Rebecca St.**

ACADEMIC PLAN OF ACTION

FINANCIAL AID PROBATION

Student Name: _____

Student ID Number: _____

Student's Current Cumulative Grade Point Average: _____

Semester(s) student will be completing Plan Of Action: _____

Please list which course(s) the student will be taking and expected grade(s) the student must achieve. This is the plan the student needs to follow to improve his/her overall GPA and reestablish Satisfactory Academic Progress. If the Student has left Briar Cliff and is returning with transferrable credits from another college that transcript must be included with this plan.

Class Schedule

Grade Needed

Advisor Signature: _____

*Due to financial aid office by August 1, 2017