

Session: 2131 Track Code: IF,IS,IX	SOCIAL SECURITY NUMBER		
	MPC STUDENT'S ID NUMBER		

2013-2014 Loss of Eligibility Appeal Process & Application

Students who fail to meet and maintain Satisfactory Academic Progress (SAP) standards for two consecutive semesters are not eligible for State or Federal Financial Aid. The SAP standard for Student Financial Services (SFS) are as follows:

- Maintain a 2.0 Grade Point Average (GPA), both semester and cumulative; and
- Complete 75% of all units attempted, both semester and cumulative.

Students may file an appeal with Student Financial Services. Students must have a special circumstance such as:

- Accident or injury to the student
- Illness that is not chronic to the student
- Death in the immediate family (Immediate family means the mother, father, grandmother, grandfather, or a grandchild of the student or of the spouse, spouse son, son-in-law, daughter, daughter-in-law, and brother, sister of the student or any relative living in the immediate household of the student.
- A onetime life altering event to the student

Students must complete the Special Circumstance section, explaining the special circumstance and attach **third party supporting documentation** such as:

- Court Order
- Police Report
- Death Certificate
- Statement from a physician

Students must complete the SFS Educational Plan section and explain what they will be doing differently to maintain Satisfactory Academic Progress.

• Educational Plan—attach a copy of the semester schedule of classes. (Courses selected must lead to successful completion of program of study.)

The Appeals Committee will evaluate the application and will consider the special circumstance. If an appeal is approved, the student will be placed on probation for one semester and must adhere to the conditions of the appeal decision. Please note that submitting a Loss of Eligibility Appeal Process & Application will not guarantee an approval.

Submit all items listed below:	
 □ Complete the Appeal Application (page 2 & 3) □ Prepare an SFS Educational Plan Statement (page 3) □ Print out class schedule and attach □ Attach all third party supporting documentation 	

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Last Name	First Name	Student ID Number
Semester for which	ch you are requesting an appeal:	
	Fall 2013	Summer 2014
Reason for the ap	opeal:	
	Semester Grade Point Average (GPA) was Cumulative Grade Point Average (CGPA) v Failed to complete 75% Semester Pace Prog Failed to complete 75% Cumulative Pace P	was below a 2.0. gression.
	Special Circu	<u>ımstance</u>
documentation:	Accident or injury to the student Illness that is not chronic to the student Death in the immediate family A onetime life altering event to the student cial circumstance.	y the following conditions and have attached third party
	Attach another sheet if you	need additional space.

SFS Educational Plan Statement						
Explain what you will be doing differently to maintain Satisfactory Academic Progress.						
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	Attach another	shoot if you need additional mass				
	Attach another	sheet if you need additional space.				
☐ I understand that I am required to follow and complete the courses listed on the attached class schedule during the semester specified to receive State and/or Federal Aid.						
	7% Pace Progressio	on on the courses listed on the attached class schedule (during the semester			
Failure to complete this form a	and provide accurate	third party documentation will result in a denial of this a to the SFS Education Plan can be made up until the 3n				
fall and spring semester and the	ne 2nd Monday of the		•			
appeal process.		an email will be sent to my MPC email.				
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By signing my name below and reading the information above, I understand my options and requirements for this appeal.						
Student Signature:		Date:				
Appeal Status: For school use	e only.					
Financial Aid was:						
	D 1 4	a Continue and the second				
Reinstated: Place on Probation & Conditions of Reinstatement:						
Not Reinstated: Why:						
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Committee Member's Signature	Date	Committee Member's Signature	Date			
Committee Member's Signature	Date	Committee Member's Signature	Date			
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