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SOCIAL SECURITY NUMBER

□	□	□	-	□	□	□	-	□	□	□
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MPC STUDENT'S ID NUMBER

Use ink only.

2019-2020 Application Changes to myAcademicPlan (MAP)

_____	_____
Last Name	First Name
Explanation as to what happened to make a change in your schedule necessary:	

List of courses that you will be taking during the semester of your appeal.

- Fall 2019
- Spring 2020
- Summer 2020

Course	Units

- I am required to follow and complete the above courses during the semester specified to receive State and/or Federal Aid.
- Failure to follow or complete the courses above in the semester that is specified will lead to Loss of Eligibility without an Appeal.
- **Changes to an approved Education Plan can be made up until the 3rd Monday of the start of the semester for which your education plan begins (if Fall or Spring) and the 2nd Monday of the start of the semester for which your education plan begins (if Summer).**

Student Signature

Date

Appeal Status: For SFS Use Only.

_____ Changes approved

_____ Changes denied

Committee Member's Signature:

_____	_____	_____	_____
_____	_____	_____	_____