



**SECTION III-A:** (Complete this section only if you are appealing based on program of student/major change.)

Program of Study/Major changed from \_\_\_\_\_ to \_\_\_\_\_

In the box below, please provide a detailed explanation as to why you have changed your program of study/major which has made your exceed the 150% maximum time frame allowed.

**SECTION III-B:** Student who is completing section III-A – please complete this section with your academic advisor/counselor.

I have met with the student and reviewed his/her new program of study/major requirements. The courses listed on the attached comprehensive educational plan are what the student needs to complete, transfer or graduate in the new program of study/major. I am providing the total amount of units that will be applied towards the students new program of study/major from all units (credits) attempted. All units (credits) that will not be applied towards the student’s new program of study/major will be deducted from the students total units (credits) attempted.

Major Units/Credits Applied Toward New Major: \_\_\_\_\_

Gen Education Units Applied Toward New Major: \_\_\_\_\_

Additional Units Applied Toward New Major: \_\_\_\_\_

Total Units Student Has Toward New Major: \_\_\_\_\_

Counselor’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**SECTION IV:** Students Certification

Your signature below acknowledges that you have read and understand the following restrictions:  I will not be funded for courses other than those listed on the educational plan.  If I enroll in courses not listed on the plan, I will be placed on Permanent Loss of Eligibility. I will have no more financial aid eligibility here at MPC.  I understand no changes may be made to the educational plan, unless I contact the financial aid office prior to the beginning of the semester and complete the Change of My MAP Form.  I must complete all courses with a minimum semester and cumulative GPA of 2.0 or better and a semester and cumulative Pace Progression of 2/3 or better. Failure to meet these requirements is a breach of the appeal which will result in financial aid disqualification with the possibility of further appeals.

\_\_\_\_\_  
Student’s Printed Name

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

Reinstate on Probation: \_\_\_\_\_  
Committee Signature: \_\_\_\_\_  
Committee Signature: \_\_\_\_\_

Not Reinstated: Why: \_\_\_\_\_  
Committee Signature: \_\_\_\_\_  
Committee Signature: \_\_\_\_\_