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SOCIAL SECURITY NUMBER

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MPC STUDENT'S ID NUMBER

2024-2025 Application Changes to myAcademicPlan (MAP) for Appeal Process

Last Name	First Name
Explanation as to why changes are being made: (Develop the changes with your academic counselor.)	

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

	Course	Units
<input type="checkbox"/> Fall 2024		
<input type="checkbox"/> Spring 2025		
<input type="checkbox"/> Summer 2025		

- I am required to follow and complete the above courses during the semester specified in order 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: _____

Counselor Signature: _____ Date: _____

Appeal Status: For SFS Use Only. _____ Changes approved _____ Changes denied

Committee Members:
