

# Appeal Form for Pell Grant

This form must be filled out entirely and must include documentation, if at all possible.

Name \_\_\_\_\_ (please print)  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
ID # \_\_\_\_\_ Phone # \_\_\_\_\_ E-Mail \_\_\_\_\_

Semester you are attending now (Please circle one semester):    **Fall**       **Spring**       **Summer**

**Attach an appeal letter describing the reason(s) why you have not met Satisfactory Academic Progress (SAP) standards.**  
(Please type, print, or write very legibly)

**Satisfactory Academic Progress Problem:**

- Cumulative Grade Point Average (GPA) Below a 2.00 at SCC
- Have not successfully completed 67% of the hours completed at SCC
- Have not earned a degree within 150% of the time allowed at SCC  
(attach a degree audit from an SCC counselor)

**Reason For Not Meeting Satisfactory Academic Progress Standards:**

- Personal illness (provide documentation)
- Family illness (provide documentation)       **Relationship:** \_\_\_\_\_
- Death in family (provide documentation)       **Relationship:** \_\_\_\_\_
- Other \_\_\_\_\_

\_\_\_\_\_  
**Student's Signature**

\_\_\_\_\_  
**Date**

**Return This Form & All Documentation To:**  
Financial Aid Office  
Shawnee Community College  
8364 Shawnee College Road  
Ullin, IL 62992  
Phone: (618) 634-3200, Option #2  
Fax: (618) 634-3368

**Financial Aid Office Use Only**

Date Received: \_\_\_\_\_  
Appeal #: \_\_\_\_\_  
Prev. Appeals: \_\_\_\_\_  
Semester: \_\_\_\_\_  
SAP Code: \_\_\_\_\_  
Hours Needed: \_\_\_\_\_  
Current GPA: \_\_\_\_\_  
Cum. GPA: \_\_\_\_\_  
# Hours Enr: \_\_\_\_\_  
Last Attended: \_\_\_\_\_  
Appeal Granted:   
Appeal Denied:   
Date of Meeting: \_\_\_\_\_

**Financial Aid Notes:**

Called and talked to student: \_\_\_\_\_  
Message was left for student: \_\_\_\_\_  
Called and no answer: \_\_\_\_\_