Appeal Form for Pell Grant

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

Name	(please print) ID#
Address	CityState Zip
Phone	E-Mail
Date	
Appeal Semester (To Receive Financial Aid): (c	check one) Fall Spring Summer
	ning the reason(s) why you have not met nic Progress (SAP) standards.
Satisfactory Academic Progress Problem (at	ttach a degree audit from an SCC counselor):
IGP - Cumulative Grade Point Avera	age (GPA) Below a 2.00 at SCC
IHR - Have not successfully complete	ted 67% of the hours completed at SCC
MAX - Have not earned a degree wit	thin 150% of the time allowed at SCC
Page on For Not Moeting Satisfactory Acades	mio Brogross Standards
Reason For Not Meeting Satisfactory Acader Personal illness (provide documenta	•
Family illness (provide documentatio	•
Death in family (provide documentation)	,
Other:	non) Relationship.
Student Signature	Date
	* * Financial Aid Office Use Only * *
Return this form, letter, and documentation to:	Date Received
Financial Aid Office	SAP Code:
Shawnee Community College	Term GPA: Cum. GPA:
8364 Shawnee College Road	#Hours Enrolled:
Ullin, IL 62992	Country d. [7]
Phone: (618) 634-3200, Option #1, Option #2	Granted
Fax: (618) 634-3368	
Financial Aid Notes:	Appeal Committee Signatures Dates
Called and spoke with student	
Message left for student	
Called and no answer / No Voicemail	
COMMENTS:	