



## OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS

1011 PAGE ST. • TROY, NC 27371 • (910) 898-9600 • FAX: (910) 576-2176  
Federal School Code – 008087 · <https://www.montgomery.edu/financial-aid>

**\*\*Complete Appeal Packets are Reviewed the First Friday of Each Month.**

### Satisfactory Academic Progress Suspension Appeal

Evaluation for \_\_\_\_\_  
Student's Name \_\_\_\_\_ Student Social Security # or ID(Required) \_\_\_\_\_

Current Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell :(\_\_\_\_) \_\_\_\_\_

It has been determined you are not making academic progress towards graduation. Federal and state regulations require students to comply with standards of academic progress as defined by the Office of Financial Aid. Students that fail to meet the minimum standards lose their eligibility to receive federal and state aid. Federal guidelines also allow the Office of Financial Aid to extend eligibility to students that fail to meet minimum standards if they can document there were mitigating circumstances beyond their control that caused them to perform below standards. Documentation must be submitted with your appeal to support your statement. Appeals are granted only in cases of serious illness, death of an immediate family member, natural disaster, or other traumatic episode. **\*\*\*Notification of appeal decision will be emailed to your School Email with instructions on how to proceed.**

Please indicate the semester you are appealing:  FALL  SPRING  SUMMER

\_\_\_\_ Death in Family      \_\_\_\_ Severe Illness      \_\_\_\_ Severe Injury      \_\_\_\_ Other – Explain  
\_\_\_\_ Severe Illness/Injury of a Family Member      \_\_\_\_ Additional Major/Exceeded 150% Maximum Time Frame

#### Items to include with this completed form:

- 1) **A signed letter describing why you are requesting an appeal must accompany this form.** Explain in detail the circumstances of your appeal. Please include what steps you have taken to resolve the problem that prevented you from successfully maintaining MCC academic standards. If you are requesting to be considered for additional time past the 150% max time frame explain in detail the reasons for changing majors or attempting an additional degree and why you are requesting additional time past the 150% maximum time frame.
- 2) **Specific Documentation supporting your request. (Example: Death certificate, hospital records)**

**\*\*\*Only requests that include documentation will be considered\*\*\***

- 3) **A program evaluation (degree audit) from the Registrar on the major you plan on pursuing.**
- 4) **Plan of Action. Meet with your advisor.** List in detail the courses you plan to take each semester until graduation and when. Include how many hours from your previous major will transfer into your new degree. How many hours you still need to complete new major and anticipated date of graduation signed by your program advisor for your newest program of study.

I understand decisions on appeals are processed on a case-by-case basis and decisions are final. If approved, I will be expected to meet with the Financial Aid Officer to ensure I understand what is expected of me to continue my education under the appeal status. I also agree that I have read the MCC Financial Aid Satisfactory Academic Policy (SAP). I certify that the information I have provided is true and accurate. According to the U.S. Department of Education, if you purposely give false or misleading information, you may be subjected to a fine of up to \$20,000 or imprisonment for up to 5 years, or both.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_