



## Appeal for Financial Aid Reinstatement

Student Name \_\_\_\_\_

ctcLink ID \_\_\_\_\_

Current Degree or Certificate Program \_\_\_\_\_

Email Address \_\_\_\_\_

✧ In order to establish and maintain financial aid eligibility, you are expected to meet all Satisfactory Academic Progress (SAP) standards outlined in [PC's SAP Policy](#). You may petition for reinstatement if unusual or extenuating circumstances beyond your control prevented you from meeting the SAP standards.

✧ Submit the completed appeal, along with ALL required components, to the Financial Aid Office via regular mail, fax, or our secure electronic drop box, [here](#). **Please do not send sensitive information via email; it is not secure.**

Your petition must include the following to be accepted by the Financial Aid Office:

- ☐ **This form (required)**, completed by you, the student, and signed and dated.
- ☐ **A personal statement (required)** from you, the student, that includes:
  - A detailed description of what happened,
  - Why were you unable to maintain satisfactory progress?
  - When did it occur, and how long did it last?
  - How the problem has been resolved and will not be a problem going forward.
- ☐ **Documentation (required)** to support your unusual or extenuating circumstance.
  - If you have an approved Medical/Administrative Withdrawal on file, supporting documentation is not required. \_\_\_\_\_ Initial here if you have an approved withdrawal on file.
- ☐ Please check the box if your circumstances are due to COVID-19 related challenges. Include the challenges you experienced in your statement.

**OR**

- ☐ Check this box if you are appealing reinstatement due to past success, meaning that you earned reinstatement by successfully completing 5 or more credits within one quarter without traditional financial aid and your grades have been posted to your transcript.
  - Quarter reinstatement was earned: \_\_\_\_\_ (quarter/year)

I certify that I have read both pages of this form and all instructions carefully.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Financial Aid Appeal Committee use only** \_\_\_\_\_ Student completed zero credits during last quarter of attendance.

\_\_\_\_\_ Approved no probation \_\_\_\_\_ Approved probation \* \_\_\_\_\_ Denied (letter of explanation mailed on \_\_\_\_\_)

Financial Aid Officer signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*\*Probation will be required for all students, except those who earned re-instatement on their own.*



## Appeal for Financial Aid Reinstatement, page 2

By signing my name on page 1, I certify that I understand:

- 1) This appeal may not be approved if I've had two or more consecutive quarters of unsatisfactory academic progress.
- 2) I cannot appeal twice in a row for the same circumstances.
- 3) My appeal will be reviewed in 7-10 days, and I am responsible for checking the results on my Portal.
- 4) Any repayment owed from unsatisfactory progress cannot be waived; any repayment I owe must be repaid, regardless of the circumstances.
- 5) The committee's decision on my appeal is final; if my appeal is denied, I have the option to earn reinstatement on my own.
- 6) If my appeal is approved after the 10th day of the quarter, my award will be based on my enrollment level at the time my appeal is approved.
- 7) If it is determined that it will take more than one quarter to meet the PC Satisfactory Academic Progress (SAP) policy, I will be placed on an Academic Plan (PLAN). Students on a plan will be monitored each quarter and will be expected to complete all attempted credits with a minimum quarterly GPA of 2.0. Failure to meet these requirements will result in re-suspension of financial aid.
- 8) I have read and understand Peninsula College's [SAP Policy](#).