REQUEST FOR APPEAL – SUSPENSION FOR COMPLETION RATE/GPA

<table>
<thead>
<tr>
<th>Priority Deadline to appeal for Fall 2011</th>
<th>June 15, 2011</th>
<th>Final Deadline to appeal for Fall 2011</th>
<th>2 weeks from date of suspension</th>
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<tbody>
<tr>
<td>Priority Deadline to appeal for Spring 2012</td>
<td>January 6, 2012</td>
<td>Final Deadline to appeal for Spring 2012</td>
<td>2 weeks from date of suspension</td>
</tr>
<tr>
<td>Priority Deadline to appeal for Summer 2012</td>
<td>May 17, 2012</td>
<td>Final Deadline to appeal for Summer 2012</td>
<td>2 weeks from date of suspension</td>
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Due to the large volume of appeals submitted, it may take several weeks for all appeals to be reviewed. Once a decision on your appeal has been made, you will be contacted through your FalconNet email.

Student’s name ___________________________ Student ID ___________________________
FalconNet email ___________________________

Please check the term you are requesting an appeal   ☐ Fall 2011   ☐ Spring 2012   ☐ Summer 2012

Please note the following:

- Financial aid suspension is a serious situation that warrants careful examination of the causes and a plan of action. Each section on the reverse must be answered thoroughly. You must attach documentation to support the extraordinary circumstances you have indicated. All appeals must be submitted through this form. Incomplete sections (including lack of documentation) will cause your request to be dismissed without consideration.

- You have been placed on Financial Aid Suspension for not successfully completing at least 67% of all of your attempted credit and/or you have not earned at least a 2.0 cumulative grade point average (2.5 for B.S. in Education). This review takes into consideration all transfer courses on the Daytona State transcript and all developmental credits.

- Appeals, when reviewed, take into consideration your academic progress at Daytona State and all other schools you attended (if the course work is listed on your Daytona State transcript), the reason for your lack of progress, and all supporting documentation submitted with this appeal form.

- Incomplete forms (such as section A, section B (the back of the form) or missing supporting documentation) will not be reviewed

- A student whose appeal has been approved must follow the academic plan specified in the approval letter/email.

- The decision of the Appeal Committee is final

IMPORTANT INFORMATION REGARDING YOUR FEE STATEMENT:

- If you had financial aid deferring the payment of your tuition and fees at the time your suspension was posted, your tuition and fees will continue to be deferred until a decision is made on your appeal, **if the appeal is submitted by the deadline**.

- If you **did not have** a financial aid award at the time your suspension was posted, you will either need to pay your charges or apply for a Falcon Loan. (See the Student Accounts Office for more information.)

- If your appeal is denied and you have unpaid tuition, fees and or a book loan/voucher, you are responsible for the payment.

Section A:

Please indicate the circumstances that have caused you to be suspended. **Your appeal will be considered if you have experienced one of the circumstances listed below, and you have attached supporting documentation.**

☐ Death of Immediate Family Member   ☐ Serious Illness/Injury (resulting in excessive absences)
☐ Unforeseen Emergency*   ☐ Non-Voluntary Military Activation

(* Please note that the following are not considered to be an emergency: working too much, family issues, transportation issues, child birth/pregnancy issues, taking too many classes, problems with Math, pace of the class, financial issues, etc.)
Section B:

1. State clearly and specifically all of the reason(s) why you failed to meet satisfactory academic progress. Please address all semesters where you failed to meet satisfactory academic progress. (If left blank, your appeal will be denied) [Please note that the following are not considered as reason to appeal: working too much, family issues, transportation issues, child birth/pregnancy issues, taking too many classes, problems with Math, pace of the class, financial issues, etc.]

2. What has changed that will allow you to make satisfactory academic program at the next evaluation. (If left blank, your appeal will be denied)

3. Please provide any additional facts that should be considered in evaluating your request.

CERTIFICATION STATEMENT: I certify that the information submitted is true and correct to the best of my knowledge. I have read each section and provided the required documentation explaining why and what has changed that will allow me to meet satisfactory academic progress at the next evaluation. I understand that I will be notified of the final decision through FalconMail, and the decision of the Appeals Committee is final.

Student’s signature: ___________________________ Date _________________

Please return to the Office of Financial Aid Services

For Financial Aid Office Use: SAP Appeals Committee:

☐ Approved  ☐ Denied  ___________________________ ___________________________  Signature  Date