



BEVILL STATE Community College

Fayette | Hamilton | Jasper | Sumiton | Carrollton

Financial Aid Appeal Form Satisfactory Academic Progress Appeal

Name _____ Student Number _____

E-mail address _____ Contact Number _____

Major _____ Credit Hours Needed for Graduation in Program _____

Semester planned for enrollment: _____

Student Signature

Date

Financial Aid Appeal Deadlines		
Term	Priority Review Deadline	Review Deadline
Fall 2018	July 31, 2018	August 14, 2018
Spring 2019	November 30, 2018	January 3, 2019
Summer 2019	April 19, 2019	May 20, 2019

**Late submissions will be considered for the next term.*

SAP Guidelines

Federal regulations require students to maintain Satisfactory Academic Progress (SAP) in three areas - **cumulative GPA, hours earned and maximum time limit**– to be eligible for financial aid. As part of the maximum time limit students are only allowed a total of three majors/programs while on financial aid at Bevill State. It is the **student's** responsibility to stay informed of the SAP standards and to monitor their own progress. In some cases, a student's failure to be in compliance with one or more areas of SAP is due to events totally beyond the student's control. ***If such mitigating circumstances can be documented for the specific term(s) when the deficiencies occurred, the student may submit this completed appeal form along with all required documentation for consideration. Bevill State will consider the number of program changes when considering an appeal request.*** Students are allowed two program/major changes for a total of three programs. Students who want to continue on financial aid must have documented circumstances of why they should be allowed to continue on financial aid. ***Submission of an appeal is NOT an automatic approval for financial aid. Appeal decisions will be posted to your myBSCC account. Students who have reached their 600% Lifetime Eligibility for Pell Grant funds are NOT eligible to appeal.***

Examples of Mitigating Circumstances

Situations considered mitigating circumstances beyond a person's control include:

- Serious illness or injury to student that required extended recovery time.
- Death or serious illness of an immediate family member.
- Significant trauma in student's life that impaired the student's emotional and/or physical health.
- Other documented circumstances.

Directions for submissions

- Do NOT discuss your **need** for financial aid as part of your rationale for reinstatement of Title IV Federal Financial Aid. It is assumed by the Financial Aid Appeals Committee that any student filing an appeal is doing so based upon financial need.
- Appeals submitted after the published deadline will not be considered for the current term but for the following term. These dates are published in the current BSCC Catalog.
- Appeals are submitted to the Financial Aid Services Central Processing Center and will be determined by the Appeals Committee.
- Students who receive a denial on their appeal will be required to make progress on their own (without the use of financial aid) until their progress is sufficient to qualify for financial aid again.
- Incomplete applications will receive an automatic denial.

Circumstances for financial aid appeal: A student may have more than one problem with SAP. If more than one category applies, a student should submit documentation for each category. Please check all areas of SAP non-compliance.

- ☐ **Students that are behind the 2.0 GPA**
- ☐ **Students not passing 2/3 of attempted hours**
- ☐ **Students that have exceeded 1.5 times the normal length of their program**

Failure to include the required attachments for Satisfactory Academic Progress problems with the items listed below will result in automatic denial. A complete Appeal Packet consists of the following:

1. **Financial Aid Appeal Form**
2. **A signed detailed letter of explanation.** Please make sure to address the specific semesters where you experienced academic problems or withdrawals. Include what actions you took to make an effort to meet your responsibilities during the time of your mitigating circumstances and how your circumstances have improved.
3. **Proof** that the event you describe occurred. (Statement from your physician, medical bills, police report, obituary, etc.)
4. **Educational Plan:** Please meet with your advisor and complete the attached Educational Plan Form for each semester you plan to enroll until you graduate.
5. **An Unofficial Transcript**

Send Appeal Packet to:
Bevill State Community College
FASCP
1411 Indiana Avenue
Jasper, AL 35501
Fax: (205)221-1841

FOR OFFICE USE ONLY

Hours Attempted	<input type="text"/>	Hours Completed	<input type="text"/>	GPA	<input type="text"/>	Major Changes	<input type="text"/>
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Recommendation _____

Committee Decision: _____ Approved _____ Denied

FA Official Signature

Date

EDUCATION PLAN UNTIL DEGREE IS EARNED

Name: _____

Student Number: _____

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Name: _____

Student Number: _____

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Semester: _____

Course Prefix	Title of Course	Credit Hours

Projected Graduation Date: _____

Advisor’s Signature: _____

Date: _____

Student’s Signature: _____

Date: _____