

Suspension Appeals Process

1. Complete this form and provide all supporting documentation as described on this form.
2. Return your appeal form and supporting documentation to the CBC Financial Aid Office in person or via mail/fax (address/fax number are at the top of this page).
3. CBC Financial Aid Office will notify you of the committee's decision via mail.

APPEALS WITHOUT DOCUMENTATION WILL NOT BE REVIEWED.

Student Information

Student Name _____ CBC ID _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number (_____) _____ - _____ Anticipated Graduation Date _____

Major _____ Check One _____ Degree _____ Certificate

Have you been **accepted** into the LVN / RN / Radiology / Dental Hygiene program? _____ Yes _____ No

1. Check all reasons that apply to your suspension.
 - I have completed less than 67% of the classes I have enrolled.
 - My GPA is below the required level, as stated in the institution Satisfactory Academic Progress found in the catalog.
 - I have attempted close to or over 150% total hours towards my intended major/degree.
 - I have changed my major.
 - I have earned a Certificate, Associate's Degree or AAS Degree.
2. Please answer the following questions on a separate paper and attach to this form. You **MUST** submit supporting documentation (i.e. medical documents, letters of recommendation, etc) to verify your extenuating circumstance. Please **do not** indicate financial hardship, as that is not relevant to this appeal.
 - a. Why have you failed to complete 67% of credit hours attempted OR maintain the proper GPA?
 - b. If you have a Certificate, Associate's Degree or AAS Degree, AND/OR have attempted close to or over 150% total hours towards my intended major, please explain why you are enrolled at a community college.

- c. What personal or academic changes have you made to improve your academic progress and/or complete your educational plan?
3. Please provide a **signed** degree plan from your advisor.
4. Please **initial** each statement to indicate you understand and have submitted all documentation requirements. Your appeal will automatically be denied, if you fail to submit required documentation.

_____ I understand that I must have documented extenuating circumstance or letters of recommendation to be eligible to appeal.

_____ I am currently enrolled only in classes that are required on my degree plan.

_____ I understand that the appeal decision will be based on the signed degree plan, which I have submitted to the Financial Aid Office.

_____ I understand if the appeal is approved, I must fulfill all conditions of the appeal approval. If I do not, I will not be able to receive aid until I meet Satisfactory Academic Progress as stated in the catalog.

_____ I understand that the Appeal Committee will review my whole academic history.

_____ I understand an appeal approval cannot re-instate my aid for a prior semester.

_____ I understand that if I am denied, **I will not** receive any financial aid (i.e. grants, loans, scholarships, work-study).

_____ I understand if the appeal is denied, the decision is final.

Certification

Student Signature

Date