



Financial Aid Appeal Form

1500 College Parkway • Elko, NV 89801 • Phone: 775-753-2399 • Fax: 775-753-2390

Website: www.gbcfinancialaid@gbcnv.edu • E-mail: financial-aid@gbcnv.edu

Student Name:		Date of Birth:	Student ID	
Home Address	PO Box#	City	State	Zip Code
Cell Phone#	Work Phone:	Valid Email Address:		

Your appeal must be received by the following deadlines in order to receive financial aid for the given semester.

Fall Semester – October 1st Spring Semester – March 1st

NO SUMMER APPEALS

- Complete appeals will be reviewed by the Financial Aid Appeals Committee, which will determine whether or not an exception to the Federal Satisfactory Academic Progress (SAP) requirements is warranted.
- Through this appeal, the student must demonstrate that **extenuating and/or unusual circumstances occurred which were beyond the students control**. Examples may include illness, injury, death of a family member or other special circumstances.
- Examples of appeals that would **not be considered** extenuating circumstances would be loss of internet connection, unable to buy books, accepted a new job, lack of childcare or lack of knowledge of the Federal (SAP) Satisfactory Academic Progress Policy.
- You may be asked to submit a **Plan of action** and meet with a counselor if the Appeals Committee deems it necessary.

Note: Submitting an appeal does not guarantee that your request will be approved.

Please indicate the policy for which you seek an exception. Check all that Apply:

- Satisfactory Academic Progress** **Maximum Credit**

SUBMIT THE FOLLOWING TO ACCOMPANY YOUR APPEAL:

- Appeal Form:** Your signature is required below. This appeal is only for the purposes related to the receipt of financial aid.
- Personal Statement:** Your statement must include the reason(s) you failed to meet SAP standards **AND** what has changed that will allow you to meet that SAP standards by the end of the semester. Explain what you will do to improve your academic performance. **Maximum Credit Appeals include your expected graduation date.**
- Documentation:** Third party documentation must be attached supporting all extenuating and/or unusual circumstances detailed in your letter. **Examples: Medical records, Obituary/Death certificate or court documents.**
- Transcript:** Unofficial academic transcript is acceptable (from MYGBC- Self-Service Student Center) – **Must submit with appeal.**
- If submitting a Maximum credit Appeal:** Print out of your “What If” report from your GBC Self-Service. Advisor’s signature on second page of this form, personal statement, and transcript. **Must be attached.**

***NOTE: INCOMPLETE APPLICATION WILL NOT BE SUBMITTED TO THE GBC FINANCIAL AID COMMITTEE.**

Student Certification

By signing below, I certify that I have read and understand the information on this form. I also certify that all information submitted with this appeal is accurate and true, to the best of my knowledge, that all copies are unaltered, and that all documentation has been appropriately obtained. I understand that monetary or criminal penalties may be imposed for fraud committed in relation to obtaining Federal Financial Aid. I also certify that I have read and understand the stipulations of the Federal Satisfactory Academic Progress Policy. Furthermore, I also understand that if my appeal is denied. I am responsible for any tuition, housing, or institutional charges that are due to Great Basin College.

WARNING! If you purposely give false or misleading information on this form to help establish eligibility Federal Financial Aid, you may be subject to a **\$10,000 fine, prison sentence, or both.**

Student Signature: _____ Date: _____



Maximum Credit Appeal Form

1500 College Parkway
Elko, NV 89801

E-mail address: financial-aid@gbcnv.edu
Website: www.gbcnv.edu/financial

Phone: (775) 753-2399
Fax: (775) 753-2390

Student Name:		Student ID
Cell Phone #	Work #	Email Address:

Maximum Time frame

A student must complete their degree within a reasonable time frame. Federal regulations limit funding to no more than 150% of the average length of the program. All attempted (total enrolled) and transfer credits are considered **regardless of whether or not aid was received**. The credit limit includes dual majors, changes in majors and second degrees. eligibility for financial aid terminates at the end of the semester in which the credit limit is reached. Time frames can vary among degrees, so the 150% time frame will be calculate on the students declared degree.

Federal '**Satisfactory Academic Progress**' (SAP) is the term used to signify a student's successful completion coursework toward a degree or certificate program.

Academic Evaluation

Declared degree at Admission & Records Office: _____ Anticipated Grad Date: ____/____
mo. year

Total number of credits: _____

Additional credits not listed above that are required to complete your GBC degree(s): _____

How many credit total has the student transferred to GBC: _____

Of those transfer credits, how many fulfill requirements for the student's current GBC Major(s) _____

Advisor's Academic Endorsement

This plan of study has been reviewed and discussed with the student. **A copy of this plan will be maintained in the student's academic file for future reference.**

Academic Advisor's Signature

Academic Advisor's Name (Print)

Date

Academic Department

Campus Site

Advisor's Comments _____

Student Certification

By signing this form, I acknowledge that by submitting this appeal there is no guarantee of an approval. I am responsible for payments for tuition, housing, or institutional charges if my appeal is denied. Furthermore, I certify that I have read and understand the Federal Satisfactory Academic Progress (SAP) Requirements. If approved, I must only take courses toward my degree objective.

Student's Signature _____ Date: _____

****An incomplete application will not be submitted to the GBC Financial Aid Appeals Committee. Submit page 1 along with this maximum credit appeal form.**

Tips for Writing Your Appeal

Directions: This is how to structure your appeal letter. Please address and explain in full detail of each area below.
Incomplete appeal application(s) will be not be submitted to the appeal committee. **No Summer Appeals.**

Date: (Input)

Joe Smith (Input your name)
123 Main Street (Input your address)
Elko, NV 89801 (Input your city, st, zip)

Great Basin College
Attn: Financial Aid Office
1500 College Parkway
Elko, NV 89801

Re: Letter of Appeal

Dear GBC Financial Aid Appeals Committee:

My name is (*insert your name*) and I a submitting a letter of appeal. I did not meet the Federal Satisfactory Academic Progress (SAP) as a Federal financial aid recipient after (*insert semester*) because
(Please explain in full detail of what happened that prevented you from meeting SAP during this semester. If it was due to medical reasons for yourself or family member, please provide medical documentation to substantiate the illness. Must be within the same timeframe that the suspension took place.)

Please address what has changed in your life and what you will do differently, so that you will be successful in all subsequent semesters going forward.

If this is your **2nd or 3rd appeal** and did not meet the five (5) SAP evaluation areas after the Probationary period, please explain in depth of why you did not meet (SAP)? **(Explain what you did or participated in while you were on Warning (Probation) like tutoring, advising, etc.)**

If given another opportunity (**Probation**) to receive Federal Financial Aid, ***explain in depth and outline*** what you will do differently to be successful in your academic career. **(Your appeal will be held to more rigorous standard. This includes A Plan of Action form to be completed and speak with a GBC Financial Advisor that will go over the Federal Satisfactory Academic Progress requirements by phone or in-person. Periodic academic progress reports from instructors may be requested.)**

Please consider my financial aid appeal and I wish for another opportunity to show that I can be successful in my academics.

Sincerely,

Sign your Name here.