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Appeal for Financial Aid Eligibility Qualitative Measurement

*an electronic version of this form is a	-	o - completely failed or withdrew from previous semester
Student S#		udent Name
Eligibility" link under your courses quiz with 100% in order for your	s. Follow the instructions to comple	It select the "Understanding Your Financial Aid te the required module and quiz. You must complete the impleted, print out the completion certificate it provides you we access to the module & quiz.
2. Type a statement explaining, in determinent.	ail, the extenuating circumstances the	nat prevented you from meeting the qualitative measurement
We want to know:		
What happened in all previous unsu	accessful semester(s)?	
• How have these previous issues bec	en resolved?	
• What is your plan to ensure you are	successful from this point forward	?
3. Indicate the # of credits you plan to	enroll in the next time you enroll fo	r courses
4. CIRCLE the semester for which you	are appealing to re-instate your fin	ancial aid - your next enrollment period
FALL (August – December)	SPRING (January – May)	SUMMER (May – August)
		pporting documentation of extenuating circumstances to this demail to financialaid@pikespeak.edu . Incomplete appeals
Examples of acceptable "official" supp	orting documentation:	
Medical Documentation Form (please	use this form and do not send your	confidential medical records)
Court documents		
Police records	90° • 1 1 1	
Counselor statements notarized on of	ficial letterhead	
Notarized 3 rd -party statements Death certificates		
Death certificates		

Deadline to appeal is 5 business days before the published census (drop) date. Appeals submitted without documentation or missing proper signatures will be denied. You will be notified via your school-assigned email account with the results of your appeal. If your appeal is granted, your applicable aid will be reinstated. If your appeal is denied, your aid will be canceled. Other conditions may apply to your approved or denied appeal.