



# Wayne County Community College District

District Office  
801 W. Fort Street  
Detroit, MI 48226  
(313) 496-2865

Financial Aid

Name _____	A00 _____
Birthdate _____	SSN _____
Phone # _____	Email _____
Address _____	City, St, Zip _____

## 2009-2010 Satisfactory Academic Progress Appeal Form

The Federal Government requires that students who receive financial aid make satisfactory academic progress towards their degree. Ineligibility for aid occurs as a result of one or more of the following:

- 1) Less than a 2.0 grade point average (G.P.A.)
- 2) Failure to complete 67% of attempted credit hours
- 3) Completion of your program within 150% of the number of credits required for completion of degree or certificate

**Submitting this appeal does not guarantee eligibility for financial aid, you must receive approval from the District Financial Aid Office. Please check the applicable reason for appeal:**

- I have experienced a significant medical illness or injury.
- There was a death of a close relative or friend.
- I changed my major and I need to extend the amount of time to complete my program of study.

**Instructions: Complete this appeal form and attach all documentation as listed below. Incomplete appeals will be denied.**

- 1) A typed detailed explanation of your circumstances that occurred during the semester in which you failed to meet the satisfactory academic standards, and please include your plans to improve your academic progress.
- 2) Third-party documentation in support of your appeal (e.g., doctor's statement, police report, death certificate or obituary and letters from third parties, such as, counselors and ministers) on letterhead.
- 3) A signed copy of current Plan of Work from an Academic Advisor.

**To the best of my knowledge, all of the information on this form and its attachments are complete and correct.**

**Note: Please include your name and student I.D. number on the top of all attached sheets.**

**Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**For Office Use Only:**

Authorized Signature:	Date:	<input type="checkbox"/> Approval for _____ hours <input type="checkbox"/> Denied
Hours:	Receiving Federal Aid:	Receiving Institution Aid:
Overall Hours:	Total Loans:	Sap History:
GPA:	Total Pell:	Majors:
	Colleges Attended:	