

SETON HALL UNIVERSITY

Scholarship Appeal Form

In order to appeal the denial of your merit based scholarship due to failure to maintain Satisfactory Academic Progress, you must **complete** this form and **attach the required documentation**. Forms lacking appropriate documentation will be regarded as incomplete.

DEADLINES: APPEALS MUST BE SUBMITTED BY June 29, 2009.

Completed forms should be mailed to the Financial Aid Department.

Please read and complete this application carefully.

Student Name: _____
(Please print) Last First MI

SHUID: _____ SSN: _____ Email: _____

Address: _____
Street City State Zip

Home Phone: (____) _____ Cellular Phone: (____) _____

Complete the following information regarding your degree.

Cumulative GPA: _____ Major: _____

Hours needed to complete degree: _____ Expected Date of Graduation: _____

Have you had a previous appeal?

____ No _____ Yes (Indicate the semester of the previous appeal) _____

Reason for Appeal

Please indicate which mitigating situation best applies to the academic difficulty you have experienced. Then, on the next page, **you must provide** a detailed explanation of the factors contributing to your inability to maintain your required cumulative GPA. In addition, please describe the steps taken to maintain your required cumulative GPA.

____ **Medical:** If a medical problem contributed to the failure to maintain eligibility, attach documentation from a medical professional from whom you have received advice or treatment.

____ **Death/Illness:** If the death/illness of a family member or close friend contributed to failure to maintain eligibility, please attach appropriate copies of medical records, death certificate, obituary, etc.

____ **Change of Major:** If a change of major has contributed to your failure to maintain eligibility, please attach a copy of the change of major form/s that you submitted to the Registrar's Office.

____ **Other Circumstances:** Please clearly state the circumstance (not listed above) and provide appropriate documentation.

***All mitigating circumstances must be documented**

Explanation of the factors contributing to your lack of academic progress:

You must provide the Committee with a written explanation below regarding the reasons that you are failing to you're your required cumulative GPA. If additional space is needed, please feel free to attach an additional page.

Please describe the steps that you have taken to maintain your required cumulative GPA.

ALL STUDENTS MUST SUBMIT A CURRENT ACADEMIC HISTORY WITH THIS APPEAL.
(Your Academic History can be printed from student self service)

I am submitting a complete Scholarship Appeal Form. **I understand that the Financial Aid Appeal Committee will not review a appeal that is incomplete or lacks appropriate documentation.** I also understand that I will be notified by mail of the Committee's decision.

_____ Student Signature _____ Date

For Office Use Only

_____ Incomplete Appeal Form _____ Complete Appeal Form

Appeal Committee's Decision
_____ Waiver Denied _____ Waiver Approved _____ Waiver Approved With Stipulation/s

Committee Chair's Signature
Date _____

Financial Aid Director's Signature
Date _____