



Spokane Falls Community College FINANCIAL AID APPEAL FOR ADDITIONAL QUARTERS

Last Name _____ First Name _____ MI _____ SSN _____

Phones () _____ Student ID No _____

Street Address _____ Apt No. _____

City _____ State _____ ZIP _____

Instructions:

To ensure your successful completion of your educational goals and continued financial aid eligibility, it is your responsibility to have a degree plan in place that provides that path to achievement. You must complete and submit with this appeal one of the following documentation requirements. If approved, federal regulations allow for payment of courses required for you to complete your current degree program. Incomplete appeals cannot be reviewed.

Documentation Attached, check one:

- Graduation Application letter from the Graduation Evaluator for your degree listed. This requires a graduation application fee that must be paid at the cashier's office.
- Financial Aid Degree Plan completed with an Academic Counselor or the programs' department chair.
- If you are requesting financial aid to complete pre-requisites at another college, attach a copy of the college catalog or webpage that clearly identifies the SFCC courses that are **prerequisites** to be **accepted** into a degree program at that college/university.
NOTE: You cannot receive financial aid for courses required to **graduate** from another college/university.

SFCC Degree/Certificate requesting _____

Based on the attached documentation, Number of quarters requesting _____

Estimated SFCC grad date _____ Number of credits per quarter _____

Quarter/Year requesting aid: Fall _____ Winter _____ Spring _____ Summer _____

Previous CCS Degree/Certificates: _____ Date Received _____

Did you transfer credits to SFCC that apply to your current degree/certificate? Yes No

If yes, enter the name of the college or university _____

Enter the degree or major _____

Will you transfer to another college/university after you leave SFCC? Yes No

If yes, enter the name of the college or university _____

Enter the degree or major _____

Explain the extenuating circumstances that prohibited you from completing your SFCC degree/certificate within the maximum timeframe.

Student Signature

Date

OFFICE USE ONLY

MISSING: Counselor Review Pre-Requisites Incomplete Which Degree

Pick One _____ or _____

CURRENT CREDITS _____ **REMEDIAL CREDITS** _____ **CREDITS NEEDED** _____

APPROVED: Quarter/YR _____ Grad _____ Contract _____

Contract Requirements: _____ **Hold:** _____ Repay _____

_____ credits by _____

Prog/Intent _____

_____ GPA by _____

Course _____

DENY: Quarter/YR _____

Repay/Default (KR) 2 Degrees/3 Attempted (KS) 6th Qtr GPA (K6) Access (KA)

GUR (KG) Mathematically not possible (KM) 2 Appeals (KT) 5 Credits (KB)

Pace of Progression _____ (KP) Qtrs Attempted _____ Qtrs Complete _____

OTHER _____

Financial Aid Review

Date