



# 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:**

It is your responsibility to review your degree plans and provide the requested documentation. This may require you to complete a Degree Application, complete an online Degree Audit and/or meet with an academic counselor for help. If approved, financial aid will only pay for courses required for you to graduate. Incomplete Appeals cannot be reviewed.

**Documentation Attached, check one:**

- Graduation Application letter from Tamara Wittstruck for the Degree listed.
- Degree Audit. On the SFCC website, click *Current Students*, then *Degree Audit* in the lower right, next *Students* tab, in the "Login to Degree Audit" box, click on *I AGREE*, select your degree. Click on *Expand All* before printing.
- If you have transfer credits, meet with an academic counselor to complete a Degree Plan.
- 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 documentation attached. Number of quarters requesting \_\_\_\_\_

Estimated SFCC grad date \_\_\_\_\_ Number of credits per quarter \_\_\_\_\_

Quarter/year requesting financial aid: Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Previous CCS Degree/Certificates: \_\_\_\_\_ Date Received \_\_\_\_\_

Did 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's signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

**MISSING:**  Counselor Review  Pre-Requisites  Incomplete  
 Pick One \_\_\_\_\_ or \_\_\_\_\_  Which Degree

**CURRENT CREDITS** \_\_\_\_\_ **REMEDIAL CREDITS** \_\_\_\_\_ **CREDITS NEEDED** \_\_\_\_\_

**APPROVED:** Quarter/YR \_\_\_\_\_ Grad \_\_\_\_\_ Contract \_\_\_\_\_

**Contract Requirements:**  \_\_\_\_\_ credits by \_\_\_\_\_  \_\_\_\_\_ GPA by \_\_\_\_\_  
**Hold:**  Prog/Intent \_\_\_\_\_  Course \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DENY:** Quarter/YR \_\_\_\_\_

Repay/Default  2 Degrees/3 Attempted  6<sup>th</sup> Qtr GPA  Access  
 GUR  Mathematically not possible  2 Appeals  5 Credits  
 Pace of Progression \_\_\_\_\_  Qtrs Attempted \_\_\_\_\_ Qtrs Complete \_\_\_\_\_  
 OTHER \_\_\_\_\_

**FINANCIAL AID REVIEW** \_\_\_\_\_ **DATE** \_\_\_\_\_