Guidelines for an Appeal

If you wish to appeal the suspension of your financial aid, you should use the following guidelines. A successful appeal will contain complete explanations of the items listed below, if applicable. You must compile and attach significant documentation to justify your appeal. The Committee will only review the materials that you provide; therefore, it is your responsibility to thoroughly document your appeal.

Appeals lacking extenuating grounds or adequate documentation will not be reviewed and the student will be notified that their appeal information was insufficient.

- Provide a written statement describing the reasons for and circumstances surrounding your lack of sufficient progress. These circumstances should be extreme or unusual circumstances that were beyond your control. You should focus on the particular academic term and/or course(s) for which you registered but did not successfully complete. Be specific and concise in your explanation since incomplete information may cause a denial or a delay in the review of your appeal. If your suspension is due to the maximum time limit, explain why you have not completed your program of study. To be granted an extension of time to complete your degree, you must be accepted into a specific program or major. Students that are accepted into the nursing program or another program requiring acceptance must submit a copy of their acceptance into the specific program. Appeal forms must be signed and dated by the student.
- Provide a detailed explanation of the measures you have taken to ensure that your academic performance will improve and/or actions you have taken to correct the circumstances that prevented your prior lack of academic progress.
- Meet with your advisor and submit a detailed plan for the completion of your degree. This plan must be signed by your advisor. The Committee will not review your appeal without this plan.
- Documentation of your circumstances will increase the success of your appeal.
- Medical circumstances must be explained and should include physician statements and supporting medical documentation indicating medical difficulties during the relevant time. If applicable, your employer should document extenuating job demands or work schedule changes that hindered your academic success. This documentation should clearly indicate that withdrawal from school and/or classes was necessary under the circumstances.
- You may provide a letter of support from someone who is familiar with your specific circumstances. The letter must include the individual signature and telephone number. This letter may be from a DSCC faculty member, advisor, clergy, or other professional individual who is knowledgeable of your situation. You must still provide your own written statement.
- Do not discuss your need for financial aid as part of your rationale for reinstatement of financial aid. It is assumed that any student filing an appeal is doing so based upon financial need. The results of the Free Application for Federal Student Aid (FAFSA) must be received by the DSCC Financial Aid Office prior to consideration of an appeal.

Your appeal of financial aid suspension will not correct your academic standing. Being readmitted through the Admissions Committee will not automatically reinstate your financial aid suspension. Suspension of your financial aid does not mean that you may not enroll at Dyersburg State as a paying student.

Return completed appeal form with attached documentation to: Financial Aid Appeals Committee
Financial Aid Office, Dyersburg State Community College, 1510 Lake Road, Dyersburg, TN 38024
Satisfactory Academic Progress Appeal Form

Name ___________________________ Student ID or Last four Digits of SSN __________

Mailing Address_____________________________________________________________

Telephone ___________ Date Submitted ______________________________

Semester Aid Suspended ___________ Semester Aid Requested ___________

Appeals are made to the Financial Aid and Scholarship Appeals Committee. The following circumstances may be considered appropriate reasons for an appeal: (a) serious illness or accident on the part of the student; (b) serious illness or accident in the immediate family, (c) personal complications. Documentation must be provided to justify your appeal.

Please indicate below the reasons why you failed to make satisfactory academic progress during your last semester. (You may attach a separate sheet if necessary.)

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Please indicate below how you plan to ensure that you make satisfactory academic progress in the future: (You may attach a separate sheet if necessary.)

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

____ I have not previously appealed. I understand that if I fail to check this box if applicable, my appeal will automatically be denied.

___________________________________________________________________________

___________________________________________________________________________

Student’s Signature ___________________________ Date ___________

Committee Comments:__________________________________________

___________________________________________________________________________

___________________________________________________________________________

Financial Aid & Scholarship Appeals Committee ___________ Date ___________

Approved _______

Denied _______
Appeal Check Off List

For your appeal to be heard, you must include **ALL** of the following:

___ Completed FAFSA
___ Completed appeal form
___ Attached supportive documentation
___ Attached educational plan