

2016-2017 Appeal Request for Satisfactory Academic Progress – Maximum Credit Hours

SECTION A: STUDENT INFORMATION

Name:

UNT Assigned ID:

SSN (last 4 digits only):

SECTION B: APPEALABLE REASONS AND DOCUMENTATION

Please indicate the reason for the appeal below and attach the required documentation.

- Serious injury of the student and/or the student's immediate family.
Required Documentation: Copies of medical records from doctor/hospital confirming injury and time period.
- Serious extended illness of the student and/or the student's immediate family.
Required Documentation: Copies of medical records from doctor, hospital and/or Office of Disability Accommodation confirming illness and time period.
- Death of the student's close relative. Date of death: _____ (MM/DD/YY)
Required Documentation: Copy of the death certificate or complete funeral program. Date of death will be verified through official records. Documentation must show relationship to student.

SECTION C: PERSONAL STATEMENT

Write a detailed personal statement, which **must** include the following information:

- Explain the reason for the appeal. Please include details about your situation. If you had multiple situations, explain all of them in detail.
- Explain when the situation occurred.
- Explain how it affected your ability to successfully complete your courses during that time period.
- Explain what has changed that will now allow you to successfully complete your courses.

SECTION D: EXPECTED GRADUATION DATE

Please list your expected graduation date: _____

SECTION E: CERTIFICATION

I certify that all the information contained on this form and in the supporting documentation is complete and correct. I understand that I must complete all sections, sign and return this form for my appeal to be processed for financial aid consideration. I understand that the deadline to submit this form and all supporting documentation is the midpoint of the semester. I understand that it may take 2-3 weeks for this request to be processed. **Electronic signatures are not accepted.**

Student Signature

Date

X _____

Return this completed form with any required documentation to:

Student Financial Aid & Scholarships, University of North Texas - 1155 Union Circle #311370, Denton, TX 76203-5017
or fax to (940) 565-2738 or save and attach as PDF and email to financialaid@unt.edu