



COMMUNITY COLLEGE
OF RHODE ISLAND

Re-establishing Your Academic Financial Aid Eligibility

Federal regulations require students to demonstrate Satisfactory Academic Progress (SAP) toward an eligible degree or certificate program to qualify to receive financial assistance.

If you are no longer eligible for financial aid assistance due to one or more of the federal requirements below, **and if you have documented extenuating circumstances**, you may submit a Financial Aid Appeal in an effort to request that your financial aid be reinstated:

1. You were denied financial aid because you did not meet the [minimum financial aid GPA standard](#).
2. You were denied financial aid because you did not meet the 67% completion rate.
3. You were denied financial aid because you did not meet the 150% requirement.

Extenuating Circumstances backed by Official Documentation

Your appeal must contain extenuating circumstances which prevented you from making Satisfactory Academic Progress.

Extenuating circumstances are considered to be significant life experiences that impacted your emotional and/or physical health so much that you were unable to make good academic progress while meeting SAP.

Examples of significant extenuating circumstances include:

- Medical illness and/or injury
- Death of an immediate family member
- Divorce
- Foreclosure or eviction
- Military Deployment
- Legal problems or police matters

All of the above examples must pertain to the semester(s) in which you did not meet Satisfactory Academic progress.

You may not base your appeal on:

- Your need for financial aid
- Your lack of knowledge that your financial aid was in jeopardy
- The classes that you took were many years ago
- You were not focused or committed to your education
- You did not know what classes to register for
- You did not know what to major in
- You did not attend class, or stopped going to class

Financial Aid Appeal Instructions

- Call to schedule a Financial Aid Appeal appointment with an academic counselor.
- To schedule this appointment, please call 825-2301 Warwick, 333-7160 Lincoln, 455-6063 Providence or 851-1625 Newport.
- You must bring the **completed Financial Aid Appeal Form (Page 2) along with your letter of explanation and supporting documentation** to your appointment.
- During this session, the academic counselor will create an Education Plan for you. This plan is required before your completed Financial Aid Appeal Packet can be reviewed by the Financial Aid Appeals Committee.
- **You will be notified about the status of your financial aid appeal through your MyCCRI email account within 10 working days from the date your completed appeal packet is reviewed.**

Student Financial Aid Appeal Checklist

You must complete this sheet and submit it as Page 1 of your financial aid appeal packet. Your financial aid appeal will not be reviewed if any of the items below are not attached.

Please ***initial*** only those items below which you have included in your Financial Aid Appeal package:

- _____ Financial Aid Appeal Form (please attach)

- _____ A letter from you explaining the circumstances which prevented you from achieving satisfactory academic progress in the past and how/why those circumstances affected you. **(Please refer to page 3 of this documentation for guidelines on how to write an effective appeal.)**

- _____ An explanation included in your letter as to how the circumstances have been resolved so that you can make satisfactory academic progress in the future. Include the steps/resources you plan to take to improve your academic record.

- _____ Documentation to support/verify the circumstances cited in your letter. For example, medical illness and/or injury can be documented with hospital or insurance records; a death can be documented with a death certificate, obituary or funeral card, provided that there is proof the deceased was an immediate family member; divorce can be documented with signed letter from a lawyer or a copy of the divorce decree etc. Such documentation must pertain strictly to the semesters in which you did not meet Satisfactory Academic Progress.

(If any one of the above items are not initialed, or are found to be incomplete or inaccurate, your appeal will be automatically denied).

Please note: Documentation cannot be from family members, significant others, roommates, etc.

In addition to the above items, the following must also be submitted with your Financial Aid Appeal Packet

- _____ Education Plan prepared by Advisor (please attach copy)

- _____ Schedule of classes in accordance with recommendations on the Education Plan (please attach)

- _____ Degree Evaluation from MyCCRI account (please attach)--Directions can be found at:
http://it.ccri.edu/Documentation/myccri-tutorials/student/degree_audit.shtml

- _____ Unofficial Transcript from MyCCRI account (please attach)--Directions can be found at:
http://it.ccri.edu/Documentation/myccri-tutorials/student/unofficial_transcript.shtml

If my appeal is approved, I understand that I am expected to meet all conditions of CCRI's Financial Aid Satisfactory Academic Progress (SAP) Policy. http://www.ccri.edu/oes/fa/academic_progress.html I understand that my financial aid appeal packet will be reviewed by the Financial Aid Appeals Committee and that the decision of the Committee is final.

Student Signature

Date

Financial Aid Appeal Form

Date: _____ Student Identification Number: _____

DO NOT LEAVE ANY SECTION BLANK

Student Name: _____

Telephone: _____ Cell Phone: _____

My Current Major is: _____

My Educational Goal is: To Obtain an Associate Degree To Obtain a Certificate

Term and Year Appealing For:

(check one term only) Spring _____ Summer _____ Fall _____ Year _____

Please initial the following statements:

_____ I understand that my Financial Aid Appeal must be submitted at least two weeks prior to the start of classes or it will not be reviewed until after the add/drop period.

_____ I understand that submission of this appeal does not protect my account against the Drop for Non-payment.

_____ I understand that I am currently NOT eligible to receive aid.

_____ I understand that if this appeal pertains to classes that I am currently registered for or plan to register for, it is my responsibility to pay for the tuition with my own resources.

_____ I understand that should my appeal be denied, I will be responsible for all tuition and fees associated with the class(s) that I am enrolled.

_____ I understand that I will be notified by e-mail of the Financial Aid Appeal Committee's decision.

_____ I understand that if my appeal is approved, ALL classes in which I enroll should be required to complete my degree or certificate. If one or more of the classes in which I am enrolled are not required, my appeal may be denied.

_____ I understand that if the appeal is approved, I must fulfill all conditions of the appeal approval. If I do not, I will not be able to receive aid until I meet the Standards of Satisfactory Academic Progress.

_____ I understand that the appeal decision is final.

PLEASE MAKE SURE ALL SUPPORTING DOCUMENTATION IS ATTACHED.

STUDENT'S SIGNATURE

DATE

WRITING AN APPEAL LETTER TO THE FINANCIAL AID APPEAL COMMITTEE

To develop a well written, explanation of your appeal to the committee, you must respond to the following questions.

1. What extenuating or mitigating circumstances have caused you to lose your eligibility for financial aid? Please remember to refer back to the cover page of this document for examples of significant extenuating circumstances.

2. How have the mitigating or extenuating circumstances been resolved so that you can make satisfactory academic progress in the future? Include the steps/resources you plan to take to improve your academic record.
 - Detail what you plan to do differently if your appeal is granted.
 - How will you prevent yourself from being in the same situation in the future?
 - Include steps you have taken to seek out tutoring or other support services.
 - If you've taken some time off from CCRI, what have you been doing (i.e. attending another school, working)?
 - If you have attended another school, please submit copies of your grades.

3. What are your specific goals for the future? What is your anticipated graduation date?

4. You must provide documentation to support/verify the circumstances cited in your letter. Such documentation must pertain strictly to the semesters in which you did not meet Satisfactory Academic Progress. For example, medical illness and/or injury can be documented with hospital or insurance records; a death can be documented with a death certificate, obituary or funeral card, provided that there is proof the deceased was an immediate family member; divorce can be documented with signed letter from a lawyer or a copy of the divorce decree etc.

5. If your appeal is due to being over 150% of your program of study credits, please include:
 - Why you have not been able to complete your degree with-in the 150% rule.
 - Why you need an extension.
 - How many credits you need to complete in order to graduate along with your anticipated graduation date.