



Academic/Financial Aid Appeal

Office of Financial Aid – SUNY Sullivan

- Your appeal must include this form, a typed letter explaining the basis of your appeal, a copy of supporting documentation, and an academic improvement plan (what actions you will take to enhance your ability to be successful).
- Answer # 1 AND # 2 below, and enter your personal information at the bottom of this form.

1. I am appealing my status of:

___ Academic Dismissal (not permitted to attend full-time as a result of prior academics)

___ Unsatisfactory Progress (loss of federal financial aid, can attend full-time)

_____ Unable to complete my degree within the maximum number of credits allowed.
(Calculation Worksheet for 150% Rule)

_____ I am a readmit student who last attended SUNY Sullivan prior to the
Spring 2015 semester when I was placed on semester dismissal.

2. I am providing a copy of supporting documentation of extenuating circumstances and/or of coursework completed winter/summer as evidence to support my appeal:

___ Court/legal documents

___ Death certificate

___ Medical records

___ Other: _____

3. I am including my academic improvement plan with an explanation for completing my degree, a timeline for completion, and an up-to-date track sheet for my program of study. (Help for completing your track sheet can be obtained from your mentor, adviser or the Learning Center.)

Please PRINT

Name: _____ Telephone: _____ ID#: _____

Address: _____

City, State, Zip: _____

- **Send form, typed letter, and all documentation to:** SUNY Sullivan - Financial Aid Office
Academic Appeals Committee, 112 College Road, Loch Sheldrake, NY 12759

You will be notified in writing of the Committee's decision.