

Appeal of State of Florida Programs (2015-2016)

Bright Futures Scholarship Programs and Florida Student Assistance Grant Program

A student has the right to appeal the termination of a Florida Bright Futures award (BF) or the Florida Student Assistance Grant award (FSAG), if he/she falls below the minimum grade point average and/or credit hours required for eligibility due to extenuating circumstance. The Florida Statute states if a student does not meet the scholarship and/or grant renewal criteria due to a verifiable illness or emergency beyond his or her control, he or she may submit a written request for an appeal to the financial aid office at the institution he or she was attending at the time the problem occurred. The institution will review the situation and make a determination.

In order to appeal the termination of BF/FSAG eligibility, complete the student appeal section on the back and return this document to the Office of Financial Aid (4400 University Center Building A). You will be contacted regarding the decision of your appeal by email or phone.

<u>Instructions</u>

- 1. Your appeal must include: (incomplete information or documentation will delay processing)
 - A. Your written statement indicating dates and time period involved
 - B. A description of the problem/incident
 - C. Its impact on your academic performance
 - D. Why future academic performance will not be impaired by condition
 - E. Attach documentation to support your appeal.
- 2. Sign and date appeal
- 3. **DEADLINE April 1st of each academic year.**

Required for an Appeal - documentation to verify the illness or emergency may include, but is not limited to, one or more of the following:

For Illness/Personal injury

- > A written statement from a medical or mental health professional, or a college or university official, of the impact of this illness/emergency or your academic performance and/or
- A copy of a bill for services rendered by a medical or mental health professional, or a document submitted by a medical or mental health professional describing the dates and services provided.

For Emergencies:

- An objective report of the occurrence such as a police report, divorce documents, insurance damage reports for natural disasters, bill for services related to the emergency, obituary.
- A written statement from a medical or mental health professional, your academic adviser or a credible professional, such as a member of the clergy or a college or university official, of the impact of this illness/emergency or your academic performance
- ➤ If illness of immediate family member: Statement from doctor detailing medical condition incurred by family member. Statement should specifically address medical condition and date span for which condition existed.

| ame | | | EMPL ID | | | |
|---|-------------------|--------------------|-------------------|-------------|--------------------|-----------------------|
| | (Please Print) | | | | | |
| dress | | | | | Phone number | |
| (Please Print) | Street | City | State | Zip | | |
| nail address | | | | | | |
| P | lease indicate wh | nich program you | are appealing ar | nd the year | you are appealing. | |
| right Futures Academic Scholarship | | Year | Bright Fu | tures Voca | tional Gold Seal | Year |
| ight Futures Medallion S | Scholarship | Year | Florida S | tudent Ass | istant Grant | Year |
| Please state in clear, co BF/FSAG award(s). Sta (attach additional page i | ate what correct | tive action(s) you | u will take to n | neet/mainta | in minimum Aca | demic Progress standa |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Student's Signature | | | | | Date | |
| 0 | | Subm | nit completed for | m to: | | |
| | | | ce of Financial A | | | |

Office of Financial Aid 282 Champions Way Florida State University Tallahassee, FL 32306-2430

OFA #326 (apflpgr) (Revised 01/21/10)

Florida State University's Use of Social Security Number policy is available at http://registrar.fsu.edu/bulletin/undergrad/info/university notices.htm