2017-2018 Appeal of State of Florida Programs

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), the Florida Student Assistance Grant award (FSAG), Children of Disabled and Deceased Veterans (CDDV), the First Generation Matching Grant (FGEN), and Benacquisto Scholarship (FIS) if he/she falls below the minimum grade point average and/or credit hours required for eligibility due to extenuating circumstances. 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/CDDV/FGEN/Benacquisto eligibility, complete the student appeal form and submit all required documentation identified in the Instructions below and return all documents 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.

Instructions

1. Your appeal must include:
   A. ATTACHED 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 the problem/incident
   E. Attach documentation to support your appeal.

   *Incomplete information or documentation will delay processing*

2. Sign and date appeal

3. DEADLINE – April 1st of each academic year.

Please indicate which program you are appealing and the year you are appealing.

<table>
<thead>
<tr>
<th>Program</th>
<th>Year (Last Received Scholarship)</th>
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<tbody>
<tr>
<td>Bright Futures Academic Scholarship _____</td>
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<tr>
<td>Bright Futures Medallion Scholarship _____</td>
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<tr>
<td>Florida Student Assistant Grant _____</td>
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<tr>
<td>First Generation Matching Grant _____</td>
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<tr>
<td>Children of Deceased or Disabled Vet’s _____</td>
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<tr>
<td>Benacquisto (Florida Incentive Scholar) _____</td>
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Student Signature: ___________________________________________  Date: _______________

OFFICE USE ONLY

Program: ______________________  Year: ______________________

Approved: _____________________  Denied: _____________________  Date: _______________

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