

Post Office Box 1595, Salisbury, North Carolina 28145-1595 • 704-216-RCCC (7222) • www.rccc.edu *Concord, NC* • *Kannapolis, NC* • *Salisbury, NC* 

## Financial Aid Maximum Time Frame Appeal Form

Fall	Spring
Student Name:	Student ID:
	City:State:Zip:
	Email Address: otate: 2.p
·· · · •	am evaluation highlighting the courses you need to take to complete your degree. ation through your WebAdvisor account. Please attach program evaluation to <i>nation</i>
Degree Objective: Associate	Degree Certificate Diploma
Name of program:	Catalog year:
Number of classes remaining to com	nplete degree:
Total credit hour requirements for t	the degree:
Number of credit hours earned towa	ards the degree:Expected graduation date:
Number of credit hours left to fulfill	l requirement for degree:
Step 2: Reason for not meeting Sati	isfactory Academic Standards
	instances that have severed you to average the Maximum Time France for your preserve
(Please indicate the extenuating circu Examples include: illness, injury, etc.	
	Imstances that have caused you to exceed the Maximum Time Frame for your program. Specify start and ending dates.)

Warning: According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to \$20,000 or imprisonment for up to 5 years, or both.

## **Step 3: Explanation of steps for future success**

(Describe the steps you have taken to address the above circumstance(s) and ensure that you will be able to follow the below timetable of remaining coursework for program completion).

## **Step 4: Student Statement and Signature**

I understand I am requesting an appeal for continued financial aid eligibility. The academic plan and program evaluation attached is the required coursework for my current program of study. I understand that not completing these courses with a C or higher and any deviation from this plan will result in my being disqualified from receiving any further financial aid. Please Initial here: \_\_\_\_\_

I have attached a copy of my program evaluation indicating the courses I have taken and the courses needed to graduate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_