



Student Financial Services
 1500 College Parkway – Elko, NV 89801
 775-753-2399
 775-753-2390(fax)
financial-aid@gbcnv.edu

Satisfactory Academic Progress Appeal 2017-2018

Student Name: _____
PLEASE PRINT

GBC ID Number: _____ Email Address: _____

DIRECTIONS:

- Complete all items on page 1.
- Your academic advisor(s) must complete all items on page 2.
- Submit unofficial academic transcript(s). GBC students can download from MyGBC Student Self-Service Center.
- Attach appropriate documentation and return to Student Financial Services.
- Appeal by these deadlines (*appeals received after these deadlines will not be considered until the following term*):

OCTOBER 1	MARCH 1	JULY 1
to receive aid for Fall Term	to receive aid for Spring Term	to receive aid for Summer Term

I am filing an appeal of (check all that apply):

- 1. **GPA** - If this appeal is based upon your cumulative grade point average, you must address the issue of completing courses with a GPA below 2.0.
- 2. **Pace** - If this appeal is because your ratio of credits attempted to credits passed is less than the 67% required, or your term completion is less than 100%, you must address enrolling in courses and earning W, F, or I grades which have negatively affected your completion ratio.
- 3. **Time Frame** – If this appeal is based on exceeding the total number of credits required to complete your degree or certificate, you must provide a plan for completing your degree or certificate. Please indicate if you have recently changed your academic plan.

I was unable to maintain Satisfactory Academic Progress during the previous academic period because (please check one):

- 1. **I experienced a death or major illness within my immediate family.**
- 2. **I experienced a personal illness or injury.**
- 3. **Other special circumstance**
- 4. **Withdrawal from all classes in a term**

Please attach a detailed statement explaining the specific circumstances that prevented you from making Satisfactory Academic Progress. Attach as many additional pages as needed to fully explain your individual circumstance(s). Personal statements that do not provide sufficient information may cause your appeal to be denied. Also attach documentation of your situation.

Please explain **what has changed** and/or how you will address the circumstance(s) described above so that you can successfully complete your academic program. Attach any additional documentation, as needed.

STUDENT CERTIFICATION:

I understand that if my appeal is approved, I will be placed on Financial Aid Probation. If I am required to complete an Academic Plan, I must follow the plan or I will be placed on suspension. I understand the decision of the GBC Financial Aid Appeals Committee is final. If my appeal is denied I am responsible for the payment of tuition, housing, or institutional charges due to GBC.

STUDENT SIGNATURE: _____ **DATE:** _____

You must meet with your academic advisor(s). He or she must complete the information below and sign the form before your appeal can be considered.

ADVISOR(S):

Please complete every section below.

1. Student's completed number of academic credits applicable toward program: _____
2. Number of credits still needed to complete degree or certificate: _____
3. Student's cumulative GBC grade point average (GPA): _____
4. Number of terms remaining to complete degree or certificate: _____
5. Please describe **the academic plan**, including a list of courses still required to complete the program. **Or** attach a copy of the student's WHIF highlighting courses still required to complete the program.

ADVISOR SIGNATURE / ADVISING UNIT

ADVISOR'S NAME – PLEASE PRINT

DATE

PHONE NUMBER