



Student Information

Name:	ID/SSN:
Email:	

I wish to appeal my status of Financial Aid Suspension due to the following circumstance:

- During the time of enrollment in which I did not make Satisfactory Academic Progress, I experienced the death of:
 - A spouse
 - A child
 - A parent
 - A sibling

Please submit a copy of the death certificate.

- I experienced an injury or illness during the term that I went on Financial Aid Suspension.

Please submit documentation on professional letterhead from your doctor or counselor stating the time the physical or mental condition occurred and that the condition was severe enough to interrupt your life activities. Details of the injury or illness are not necessary.

- I have taken the required number of courses and earned SAP at Barton ([See SAP policy.](#)) My bill with Barton has been paid in full.

- Special Circumstances --

- a. Please explain in detail the situation which prevented you from successfully completing your coursework during the term of which you were placed on Financial Aid Suspension.
- b. Please submit a letter on professional letterhead from a person in a position who was aware of the situation you were going through and can confirm the situation you were in was not conducive to academic success.

Student Signature: _____ **Date:** _____

Appeals are not automatic. Please allow 2-3 weeks processing time.

For the Financial Aid Office to Complete

Authorized Signature:	Date:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Barton Hours:	Barton GPA:	SAP History:
Overall Hours:	Overall GPA:	

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