STUDENT NAME: ____________________________

ID#: ____________________________ PHONE#: ____________________________

Your appeal must be received by the following deadline in order to be considered for financial aid for the given semester:

<table>
<thead>
<tr>
<th>Semester</th>
<th>Deadline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall Semester</td>
<td>November 1st</td>
</tr>
<tr>
<td>Spring Semester</td>
<td>March 15th</td>
</tr>
<tr>
<td>Summer Semester</td>
<td>June 15th</td>
</tr>
</tbody>
</table>

- Please do not use this form for Satisfactory Academic Progress – The Satisfactory Academic Progress Appeal form can be downloaded from our website at www.financialaid.utah.edu/forms.

- Only complete appeals may be reviewed by the Financial Aid Appeal Committee, which will determine whether or not an exception is warranted. Through this petition, the student must demonstrate that unusual circumstances occurred which was beyond the student’s control. This petition must include a written, detailed explanation, and supporting documentation.

- All notifications regarding this appeal will be sent electronically via your Umail account.

- Appeal decisions will be sent via your Umail Account within thirty days of submitting a completed petition.

- Federal and University policies require the reporting of instances and/or allegations of behaviors involving discrimination or sexual misconduct. For more information, please see http://oeo.utah.edu/.

- All appeals are processed in the order they are received and are subject to the volume and time constraints of the committee.

NOTE: Submitting this form does not guarantee that your request will be granted.

INSTRUCTIONS:

**FORM.** Indicate from which policy you seek an exception. Your signature is required below. This appeal is only for purposes related to the receipt of financial aid. This appeal is for the Financial Aid office only.

**LETTER.** Attach a letter from yourself, addressed to the Financial Aid Appeals Committee, describing your unique circumstances and the reasons you are requesting an exception to policy. If applicable, address how the circumstances have been resolved so that future academic performance will not be affected.

**DOCUMENTATION.** Attach documentation to support all unusual circumstances detailed in your letter.

Please state the policy from which you seek an exception:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Student Certification Section:

By signing below, I certify that I have read and understand the information on this form. I also certify that all information submitted with this appeal is accurate and true, to the best of my knowledge, that all copies are unaltered, and that all documentation has been appropriately obtained. I understand that monetary or criminal penalties may be imposed for fraud committed in relation to obtaining Federal Financial Aid.

STUDENT SIGNATURE: ____________________________ DATE: ____________________________

WARNING: If you purposely give false or misleading information on this form to help establish eligibility for federal student aid, you may be subject to a $10,000 fine, prison sentence, or both

*Please note that personal identifiable information cannot be accepted by the University of Utah via email. This would include, but not be limited to, any tax document, social security card, driver's license, passport, citizenship document, etc. Please mail, fax or bring these documents to our office.*

The University of Utah is an Equal Opportunity and Affirmative Action institution. For detailed information or to request a reasonable accommodation, visit https://utah.edu/nondiscrimination

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