

East Central University

Financial Aid Suspension Appeal

Appeals will be accepted through the first week of the semester in which you are requesting reinstatement.

Student's Name _____ Social Security # _____

Instructions: Complete this form, attach an unofficial ECU transcript, documentation, have advisor/counselor section completed, and return to the Financial Aid Office.

I wish to be reinstated for the _____ semester. I plan to enroll in _____ hours. My major is _____.

My expected date of graduation is _____.

Have you appealed before? _____

Student section:

Reason for failure to meet guidelines. (Attach documentation as necessary)

What has changed or why do you think you can succeed now? (Attach additional sheets if needed)

I understand that if my appeal is approved I must complete full time hours with a 2.0 GPA during my semester of probation unless I request and am granted an exemption for that requirement from the appeals committee. In that case I must complete the number of hours I originally enroll in with a 2.0 GPA.

Student's Signature

Date

Advisor/Dean/Counselor (A brief statement regarding your evaluation and advisement)

Advisor/Dean/Counselor Signature

Date

Mail or take to: Financial Aid Office
East Central University
1100 E. 14th Ada, OK 74820

Committee Action

Appeal: Approved _____ Denied _____

Initials _____ Date _____

