

## East Central University Financial Aid Suspension Appeal Form

Financial Aid Office 1100 E. 14th Street PMB A-8 Ada, Oklahoma 74820 Phone: 580-559-5243 Fax: 580-559-5638

Student's Name:	Student ID Number:			
Instructions: Complete this form. Attach an unofficial ECU transcript and documentation. Have your advisor or counselor complete the appropriate section. Return all documents to the Financial Aid Office. <u>Appeals will be accepted through the established deadline for each semester in which you are requesting reinstatement</u> . Lack of documentation and incomplete forms will be DENIED!				
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Student Section:  I wish to be reinstated for theFall	SpringSummer.	I	have	have not appealed before.
My major is	My expected g	raduation date is		
Reason for failure to meet guidelines. (Attack	n documentation as necessary.)			
What has changed that will allow you to succ	eed now? (Attach additional sheet	rs if needed.)		
I understand that if my appeal is approved, I must complete full time hours with a 2.0 (UNDG) or a 3.0 (GRAD) 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 (UNDG)/ 3.0 (GRAD) GPA.				
Student				Date
Academic Advisor or College Dean Section: Please write a brief statement regarding you	r evaluation and advisement.			
Academic Advisor/Dea	<u> </u>			Date

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