



STUDENT INFORMATION

_____			_____
LAST	FIRST	MI	ID NUMBER
_____			_____
STREET ADDRESS or PO BOX			EMAIL ADDRESS
_____			_____
CITY	STATE	ZIP CODE	HOME PHONE

You may use this form to request a reevaluation of your ineligibility for financial aid. Please keep in mind the Financial Aid Office will review your information after your ineligibility status is official.

- Appeal must be submitted within 60 days of the date the notice of ineligibility is mailed.
- Please check boxes that pertain to your situation.
- Every student **MUST** fill out the Academic Plan on page 2 and provide a detailed letter of explanation including what will be different about the upcoming semester and how you will be able to complete your courses.

FINANCIAL AID PROBATION DUE TO LOW GPA OR INSUFFICIENT UNITS:

- Extenuating Medical Circumstances** – Attach a detailed letter of explanation **and** a signed statement from your health care professional that you are able to return to Chapman University.
- Extenuating Personal Circumstances** – Attach a detailed letter of explanation and supporting documentation.
- Difficulty in completing courses** – Attach a detailed letter of explanation.
- Death in the immediate family** – Please attach a photocopy of the death certificate or copy of obituary with a letter of explanation.

FINANCIAL AID PROBATION DUE TO EXCESSIVE UNITS:

- I am a graduate student in the _____ program and my course of study has been prolonged. Attach a detailed letter of explanation.
- I am an undergraduate and some of my transfer credit hours do not count toward my degree.
- Other academic situation(s). Attach a letter of explanation.

PROGRAM EVALUATION

ALL STUDENTS MUST PROVIDE A COPY OF THEIR PROGRAM EVALUATION

You can obtain your program evaluation by printing it from WebAdvisor
(<https://ariel.chapman.edu/WebAdvisor/WebAdvisor>)

ACADEMIC PLAN

Complete this section by listing the required coursework you plan to take and in what semester to complete your degree on time.

FALL 20__	SPRING 20__	FALL 20__	SPRING 20__

FALL 20__	SPRING 20__	FALL 20__	SPRING 20__

CERTIFICATION STATEMENT

I have enclosed a letter of explanation that addresses the circumstances that prevented me from completing my deficient credits, maintaining a 2.0 GPA, or completing my program in a timely manner. My letter explains what will be different about the upcoming semester and how I will be able to complete my courses. I understand that I will be notified by mail of the final decision at the address provided above.

STUDENT SIGNATURE

DATE

OFFICE USE ONLY

<input type="checkbox"/> APPROVED	COMMENTS:
<input type="checkbox"/> DENIED	