



2026-2027
Financial Aid
Suspension Appeal
Form

Financial Aid Department
Phone: 910-938-6749
Fax: 910-938-6717
Email: finaid@coastalcarolina.edu

Name _____ ID# _____

The Financial Aid Department is required to ensure that students receiving financial aid are making reasonable progress towards completing their degree. For this reason, your academic transcripts are reviewed each semester to verify that you have completed the required number of hours (quantitative), maintained the minimum grade point average (qualitative), and have not exceeded the maximum number of cumulative hours allowed. If you have failed to make progress in one of these areas or a combination of these areas, you have the opportunity to appeal your Financial Aid Suspension by completing this form.

2nd 67% (Quantitative) – Failure to complete 67% of all attempted credits for the past two consecutive semesters.

2nd GPA (Qualitative) – Failure to maintain a cumulative GPA of at least 2.0 for the past two consecutive semesters.

Maximum Time Frame (150%) – A maximum timeframe violation occurs when a student attempts more than 150% of the credits required to complete their degree program. This results in a loss of federal financial aid eligibility, as students are expected to complete their studies within a reasonable timeframe.

- **Example of the 150% Rule:** If a degree requires 60 credits, you lose eligibility after attempting more than 90 ($60 \times 1.5 = 90$)
- **Credits Included:** All attempted credits count, including transfer credits, repeated courses, and withdrawals.



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FINANCIAL AID APPEALS PROCESS

Any student who becomes ineligible to receive financial aid has the opportunity to appeal for extenuating circumstances. If the student is deemed ineligible for financial aid, he or she may appeal the eligibility decision of the Financial Aid Department by submitting a written request for an appeal, in addition to any supporting documentary evidence showing any extenuating circumstances that caused the student to become ineligible, to the Assistant Director for Financial Aid Services or designee within ten (10) working days from the date of notification. If no action is taken to request an appeal, then the decision not to award financial aid will remain in effect.

Upon receipt of the student's written request for an appeal, the Assistant Director for Financial Aid Services or designee will inform the Chair of the Financial Aid Appeals Committee in writing within ten (10) working days, and the Chair of the Financial Aid Appeals Committee, upon receiving written notification from the Assistant Director for Financial Aid Services, will convene the Financial Aid Appeals Committee within ten (10) working days in order to hold an appeal hearing on the student's request for the reinstatement of financial aid.

Prior to attending the appeal hearing, the student must also meet, as part of the appeal process, with either a Success Coach or an Academic Advisor/ Counselor to establish an Academic Success Plan, and the Financial Aid Appeals Committee will review the established Academic Success Plan during the hearing. Both the student and a Financial Aid Department representative must be present at the hearing, and the Financial Aid Department representative must provide documentation to show that the student is not eligible to receive additional financial aid.

After reviewing all available evidence, as well as hearing from not only the student but also the Financial Aid Department representative, the Financial Aid Appeals Committee will render a decision within five (5) working days, and the student will be notified of the Financial Aid Appeals Committee decision in writing. With an approved appeal, the student will receive a Financial Aid Appeal Agreement Form that lists all conditions and stipulations of the approved appeal and must be returned within five (5) working days of notification. A retroactive payment of financial aid for semesters when a student was on academic probation or curriculum completion probation is prohibited. If the student chooses not to attend the hearing, the decision of the Financial Aid Department will stand and be final. A student may be reinstated for financial aid by (1) approval of the Financial Aid Appeals Committee or (2) enrolling at the College without the use of federal financial aid and maintaining satisfactory academic progress consistent with the established College standards.

All decisions of the Financial Aid Appeals Committee are final.



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Violation(s) Incurred (check all that apply) _____ 2-67% _____ 2-GPA _____ 150%

Semester Violated _____

Eligibility

1. Complete the Appeal Form and attach supporting documentation.
2. Explanation of how the circumstance(s) checked above prevented you from maintaining Satisfactory Academic Progress, your educational goals, and what has changed to allow you to be successful now (page 6).
3. Sitting out a semester does not affect your suspension status.
4. Meet with an Academic Advisor/Counselor to complete an Academic Plan to Reinstate Aid Eligibility prior to an appeal appointment if a violation is due to GPA.
5. If you are appealing due to a maximum timeframe (150%) violation, you must meet with an Academic Advisor/Counselor to complete an Academic Plan (page 7), indicating all remaining required courses in your current academic program. Any extension of financial aid eligibility will be limited to only those courses that are required to complete your academic plan/degree.

NOTE: If the appeal is being submitted as a result of only a 67% violation, no Academic Plan is needed.

6. Bring the completed Appeal Form and supporting documentation to the Financial Aid Department no later than **ten (10) working days from the date of your notification**.

Date of Violation Notification _____

7. To be considered for approval, a student must be able to achieve a GPA of 2.0 and a completion rate of 67 percent, both cumulative, in the semester of reinstatement.
8. This is a one-time appeal. Appeals will not be granted consecutively. For example: If your appeal is approved for fall and you do not meet the GPA and completion rate requirements by the end of the fall semester, you will not be eligible for another appeal approval in the spring.



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Writing a Successful Satisfactory Academic Progress (SAP) Appeal

Explain what happened

Why were you unable to maintain satisfactory academic progress? Your satisfactory academic progress (SAP) appeal explanation must include the following:

- What the problem was?
- When the problem occurred?
- How long the problem lasted?
- How this affected your ability to complete your coursework?

Explain what has changed

What corrective measures have you taken or will you take to achieve and maintain satisfactory academic progress?

- What are you doing to prevent this from impacting your satisfactory academic progress?

Tips for Writing Your Appeal Statement of Explanation

Admit the Problem

Take a hard look at your situation to determine what has kept you from making satisfactory academic progress. Perhaps you need help with time management or study skills. Admit the problem and explain how you plan to get help.

Attach any relevant supporting documentation

This may include doctor's statement, copy of hospital/urgent care/physician's bill, obituary, funeral notice, police report or death certificate.

Valid reasons for a SAP appeal:

- Medical emergencies
- Severe health issues
- Severe personal or family problems
- Financial or personal catastrophe – fire, flood, hurricane, etc.
- Return for a second degree or certificate, or change of program of study
- Death of immediate family member (parent, sibling, spouse, child, grandparent, grandchild)
- Loss of employment
- Student's separation or divorce

Note: Lack of communication or lack of awareness of withdrawal policies, requirements for SAP or unpreparedness for college coursework will not be accepted as a reason for the purpose of an appeal.



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Please check the category that applies to you and follow the instructions for that category. For all categories, include an explanation of how the circumstances prevented you from maintaining Satisfactory Academic Progress, your educational goals, and what has changed to allow you to be successful now. Please address your Warning Semester as well as the most recent semester that led to Financial Aid Suspension.

Basis for Appeal

I wish to appeal the suspension of my financial aid for the reason(s) indicated below:

- 1. Illness of student or immediate family member (parent, sibling, spouse, child, grandparent, grandchild)
- 2. Disasters – fire, flood, earthquake, hurricane, etc.
- 3. Death of immediate family member (parent, sibling, spouse, child, grandparent, grandchild)
- 4. Loss of employment or change in employment status.
- 5. Student’s separation or divorce.
- 6. Extenuating circumstance not listed above; please describe in your written statement.

Documentation Provided

- | | | |
|--|--|--|
| <input type="checkbox"/> Doctor’s note | <input type="checkbox"/> Eviction notice | <input type="checkbox"/> Court Documentation |
| <input type="checkbox"/> Obituary | <input type="checkbox"/> Separation Decree | <input type="checkbox"/> Divorce Decree |
| <input type="checkbox"/> Letter from Employer | <input type="checkbox"/> Police Report | <input type="checkbox"/> Death Certificate |
| <input type="checkbox"/> Other (Transportation and childcare issues do not count.) | | |

Violation(s) Incurred (check all that apply) 2-67% 2-GPA 150%

Semester Violated _____

NOTE: Supporting documentation MUST be attached. For example, statements from medical doctors or psychologists, death certificate, lay-off notices from employers, separation papers, etc.

Explanation of how the circumstance(s) checked above prevented you from maintaining Satisfactory Academic Progress, your educational goals, and what has changed to allow you to be successful now.

- I understand that any documentation submitted with this appeal will become a permanent part of my financial aid file at Coastal Carolina Community College.
- I understand appeals without documentation may be automatically denied.
- I understand that I will be notified via email of the decision made on my appeal.

Student Signature

Date

Academic Plan for Current Program of Study _____

Semester 1: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____	Semester 2: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____
Semester 3: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____	Semester 4: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____
Semester 5: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____	Semester 6: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____ Course: _____ Hrs: _____

 Academic Advisor/Counselor Signature

 Date

Certification Statement

- I understand that I am requesting an appeal for continued financial aid eligibility. The timetable outlined above is for the required coursework for completion of my current program of study only. I understand that any deviation from the above may result in my being disqualified from receiving any further financial aid.
- I understand that decisions on appeals are processed on a case-by-case basis. If approved, I will be expected to complete 100% of the courses for which I register (no F's, I's, or W's).
- I have attached a copy of my Program Evaluation indicating the courses I have taken and the courses needed to graduate.

 Student Signature

 Date