

SOUTH MOUNTAIN COMMUNITY COLLEGE

MAXIMUM TIMEFRAME APPEAL FORM

Student Name	Student ID	XXX-XX- Social Security #	Program or Major
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I am requesting Financial Aid for (select one) : Fall or Spring or Summer Year: _____

According to Satisfactory Academic Progress guidelines, you are on financial aid suspension. You may appeal by completing this form with an "Academic Plan Restricted Course List "(RCL), evaluated program check sheets or degree progress report, and all academic transcripts, to the Financial Aid Office. Incomplete forms will be rejected. You understand by submitting this form any enrollment within the Maricopa County Community College District may be used for determining the outcome of this appeal. **Notification of the committee's decision will be delivered to your Student Center. Please allow at least 15 business days (may take longer during peak processing periods). All Committee decisions are final.**

Students may request to have their timeframe extended under the following circumstances:

- Program of study has changed from _____ to _____
- I have attempted 150% or more of the credits required for my degree/certificate.
- I am changing the current "Approved" Academic Plan (RCL) on file.
- I have transferred hours that do not apply to my program of study.
- I have an Associate's Degree and am pursuing a second degree or certificate.
- I have earned a Bachelor's Degree (or higher) and am pursuing another Degree or Certificate.
- I must take specific coursework in order to **enroll** in an eligible program (students requesting an extension under this requirement must be taking classes that are a prerequisite for admission to the program. Students meeting this Preparatory Course Work requirement are not grant eligible and may only be considered for loans during one consecutive 12 month period).

In order to be considered for federal financial aid, **you must provide a detailed explanation** as to why you have earned more credits than your degree/certificate program requires, why you have changed your program of study, requesting to change the current Academic Plan (RCL) on file, or, if you already have a degree, why you are taking additional coursework. _____

Student Signature: _____ Date: _____

This Section – Office Use Only

Date _____ Committee initials: _____ Effective: Fall/_____ Spring/_____ Sum/_____

Approved #Cr. attempt _____ #Cr. earned _____ CGPA _____

Disapproved

Approved with Stipulations: _____

Your signature below acknowledges that you have READ & UNDERSTAND the above restrictions &/or recommendations.

Student Signature: _____ Date: _____



Chandler-Gilbert Community College • Estrella Mountain Community College • Gateway Community College • Glendale Community College • Maricopa Skill Center • Mesa Community College • Paradise Valley Community College • Phoenix College • Rio Salado College • Scottsdale Community College • South Mountain Community College



SMCC Financial Aid Office
7050 S. 24th Street | Phoenix, AZ 85042
602.243.8300 | Southmountaincc.edu
<http://www.southmountaincc.edu/financial-aid/>

The Maricopa Community Colleges are EEO/AA Institutions.

Academic Plan Restricted Course List 2017-18

Financial Aid Office
7050 S. 24th St.
Phoenix, AZ 85040
Phone: (602)
243-8300 FAX: (602)

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Student Name	Student ID#	SSN: xxx xx-__-__	Program or Major

I am requesting Financial Aid for: Fall or Spring or Summer Year: _____

INSTRUCTIONS: Meet with a SMCC Academic Advisor and list courses needed to complete the indicated program. List courses in progress only if they are required for the indicated program. Attach copies of **ALL** unofficial academic transcripts which have not been evaluated and an **evaluated SMCC or University program check sheets, or degree progress report for program indicated above.** When completing this form, please be complete and accurate.

NEEDED or IN PROGRESS: Only these courses may be used to maintain and /or reinstate Financial Aid eligibility.

Advising Notes	Course #	Credits	Financial Aid Notes

TOTAL HOURS TO BE COMPLETED _____

BE
AWARE

Your signature below acknowledges that you have READ and UNDERSTAND the following restrictions:
ADDITIONAL, SUBSTITUTED or REPEATED classes will NOT be funded UNLESS an ADDENDUM is FILED and APPROVED prior to the end of the affected term. You will not be funded for courses other than those listed and approved on this form. If you receive funds for classes other than those listed and approved on this form, your award may be reduced or cancelled, and/or you may be Suspended from any further Financial Aid. Only these courses may be used to maintain and/or reinstate Financial Aid eligibility.

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Student's Signature	Date	SMCC Advisor Signature	Date