

Please complete this form to appeal an Academic Action and/or Cancellation of Financial Aid. Please be advised that in order for financial aid to be restored: (1) extenuating circumstance(s) must have existed that affected your academic performance; and (2) the circumstance must be resolved/no longer exist. Based on the information you provide as well as Provost will make the final determination regarding an Academic Action; there is no further appeal process.

Student Name		ID#												
Address														
City, State Zip														
Phone		Email												

Please complete the following with as much detail as possible. If you would rather attach your answers as a separate document you may, please just ensure that you fully answer each question.

WHAT

The extenuating circumstance(s) that affected my academic performance are (be specific):

WHEN

The extenuating circumstance(s) that affected my academic performance occurred on (supply specific date(s)):

HOW and WHY

The extenuating circumstance(s) affected my academic performance occurred in the following way(s):

DOCUMENTATION

Detail below and provide copies of any documentation needed to support your appeal such as, but not limited to, a relevant death certificate, disability verification, medical doctor statement, or professional third-party correspondence. If no documentation is available, you must explain why.

RESOLUTION

The circumstance(s) have been resolved/no longer exists because (be specific):

CORRECTIVE ACTION PLAN

The actions I will take to achieve satisfactory academic progress are:

ATTESTATION

I attest to the accuracy of the information submitted above and attached documentation submitted.

Financial Aid Cancellation Appeal:

I understand that I may be eligible for only one appeal each for federal and state aid.

Academic Action Appeal:

I agree that I will accept any academic restrictions indicated by the committee as a condition of reinstatement and/or the restoration of aid.

Signature

Date

CONTACT INFORMATION

Office of Financial Aid
Fax: 631-656-2191
Email: financialaid@ftc.edu

Office of the Registrar
Fax: 631-656-2172
Email: registrar@ftc.edu

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