Appeal Checklist

Name: ________________________________

Student ID/Star ID: ____________________

☐ Student Appeal Form

☐ Appeal/Petition for Reinstatement of Financial Aid

☐ Letter
  • What are they asking for
  • What happened that they were not successful (extenuating circumstances explained)
  • What has changed that they can be successful if appeal is approved

☐ Documentation of circumstances (examples)
  • Letter from medical provider
  • Obituary

☐ Academic Improvement Plan Completed
  • This now serves as the “Satisfactory Conditions Form” also so it is very important that the “terms and conditions” portion on the front page be completed.
  • Transcript and DARS attached

☐ Previous appeal copies when appropriate