Charge On 15 Award Appeal

Instructions

Renewal Criteria for Award

- Previously received a disbursement of the Charge On! 15 Grant
- Have a valid Free Application for Federal Student Aid on file annually
- Demonstrate financial need based on the information provided on the FAFSA (The Office of Student Financial Assistance may establish a maximum Expected Family Contribution annually)
- Successfully complete 30 hours between the prior fall and spring terms
- Earn a cumulative GPA at least 2.5 or higher
- Meet all other financial aid eligibility requirements to include Satisfactory Academic Progress

Note: Students have one opportunity to appeal. Once an appeal is approved, students are no longer eligible for future appeals.

Instructions for Appeals

1. Read all instructions, fill out the form completely and sign and date the appeal.

2. Attach a letter describing in detail the reasons or circumstances that merit a review of your award eligibility. Your written statement must include a description of the problem/incident indicating dates and time period involved, as well as the impact on your academic performance.

3. Attach documentation supporting your appeal. Include any statements (on company letterhead) from third party persons (e.g. clergy, employers, medical professionals, etc.) who can verify your extenuating circumstances.

4. Submit the completed appeal with all supporting documentation to the University of Central Florida, Office of Student Financial Assistance, 4000 Central Florida Blvd., Millikan Hall Room 107, Orlando, Florida 32816-0113. Appeals can also be fax number to 407-823-5241 or uploaded as instructed at https://finaid.ucf.edu/forms/upload/.

5. Completed appeals that are submitted will be reviewed within 10 business days. Once a decision has been determined an email response will be sent to the student’s knights email address.

6. Please note that in order to ensure your appeal is reviewed prior to the beginning of the fall semester your scholarship appeal must be in our office by July 1st prior to the beginning of the upcoming fall semester. If you are taking coursework during summer to meet the 30 hour requirement you will need to submit your completed appeal once summer grades post. Incomplete applications and requests for additional documentation will cause delays. Please plan accordingly in case you experience a delay in your appeal. You will be responsible for any late charges.

7. If you are not meeting SFA Satisfactory Academic Progress (SAP) Standards, you must still go through the SAP Appeal to attempt to regain eligibility for aid.

Supporting Documentation: Documentation must include, but is not limited to, divorce decrees, death certificates, and letters from doctors, counselors, advisors etc. Written statements from the professional should reference the student’s name, diagnosis, dates of treatment and length that situation has or was occurring.

- Attach documentation supporting your appeal. Include any statements (on company letterhead) from third party persons (e.g. clergy, employers, medical professionals, etc.) who can verify your extenuating circumstances. Written statements from medical professionals should reference the student’s name, diagnosis, dates of treatment and length that situation has or was occurring.

- Report of incident/s, such as a police report, insurance damage report, and bill/s for services related to emergency, obituary, etc.

- Failure to corroborate your circumstance may result in your appeal being denied for lack of documentation.
Charge On 15 Award Appeal Form

INSTRUCTIONS: To ensure your appeal is reviewed prior to the beginning of the fall semester your scholarship appeal must be in our office by July 1st prior to the beginning of the upcoming fall semester unless you are taking coursework during summer to meet the 30 hour requirement. Please submit those appeals as soon as your grades from summer are official.

Incomplete applications and requests for additional documentation will cause delays.

Reason for appealing: (Select one)
- Emergency
- Medical
- Took course in summer to meet renewal

Reason for Non-Renewal Status: (Select all that apply)
- Hours
- GPA

Name ________________________________ UCFID __________________

Email ________________________________

Address ________________________________

Local Phone # __________________ Work Phone # __________________

Major ________________________________ Expected Graduation Date __________

I understand that this Appeal will be returned to me and will not be reviewed if the following items are not attached to this application:

1. A letter of explanation
2. Documentation that supports the appeal such as medical bills, divorce decrees, death certificates, letters from doctors, counselors, parents, etc.

_________________________________________ _______________________
Student Signature Date

OFFICE USE ONLY

Meeting Date ______________________________

Date Student Notified with Results __________ Method of Notification __________________

Decision _________________________________

Contingencies ________________________________________________________________

Phone: 407.823.2827 • Fax: 407.823.5241 • Web: finaid.ucf.edu | a division of Student Development and Enrollment Services