

CAÑADA COLLEGE FINANCIAL AID OFFICE
4200 FARM HILL BLVD, REDWOOD CITY, CA 94061 (650) 306-3307 FAX (650)-306-3116
www.canadacollege.net

APPEAL FOR REINSTATEMENT OR CONTINUATION OF FINANCIAL AID

NAME: _____ SOCIAL SECURITY/ID #: _____

ADDRESS: _____ PHONE () _____

_____ DATE: _____

REASON(S) FOR PETITION (CHECK AND COMPLETE ALL THAT APPLY):

EXCESSIVE ATTEMPTED UNITS (90 OR MORE) AS OF START OF _____ SEMESTER

FINANCIAL AID SUSPENDED STATUS AS OF START OF _____ SEMESTER

FINANCIAL AID PROBATION STATUS AS OF START OF _____ SEMESTER

OTHER _____ AS OF START OF _____ SEMESTER

I PLAN TO GRADUATE OR TRANSFER FROM CAÑADA COLLEGE AS OF _____ / _____
MONTH YEAR

MY GOAL IS TO COMPLETE: A CERTIFICATE AA/AS DEGREE TRANSFER/BA DEGREE

MY MAJOR AREA OF STUDY IS _____

YOU (THE STUDENT) MUST COMPLETE ITEMS 1 AND 2. YOUR CAÑADA COLLEGE COUNSELOR MUST COMPLETE ITEM 3. THIS FORM MUST BE SUBMITTED TO THE FINANCIAL AID OFFICE (BUILDING 8, ROOM 211) TO THE ATTENTION OF THE DIRECTOR OF FINANCIAL AID. IT IS STRONGLY RECOMMENDED THAT DOCUMENTATION BE INCLUDED (I.E. ILLNESS, FAMILY EMERGENCY) WITH THIS PETITION IF THAT IS THE BASIS FOR REQUESTING AN EXCEPTION. * **A CURRENT STUDENT EDUCATIONAL PLAN (SEP) MUST BE INCLUDED WITH THIS PETITION.** THE SEP SHOULD SHOW WHAT CLASSES WILL BE TAKEN FOR THE CURRENT SCHOOL YEAR. YOU WILL RECEIVE A WRITTEN RESPONSE IN APPROXIMATELY TWO TO THREE WEEKS FROM THE DATE OF RECEIPT OF THE PETITION REQUEST.

1) **REASON FOR EXCEPTION:** DESCRIBE ANY CIRCUMSTANCES YOU BELIEVE SHOULD BE CONSIDERED IN REVIEWING YOUR PETITION FOR REINSTATEMENT OR CONTINUATION OF FINANCIAL AID. BE AS SPECIFIC AS YOU CAN, GIVING DATES AND TIMES IF RELEVANT.

2) **PLAN FOR RESOLVING EXCEPTION(S):** DESCRIBE HOW YOU INTEND TO RESOLVE THE CIRCUMSTANCE(S) AS IT RELATES TO SUCCESSFULLY COMPLETING YOUR STUDIES AT CAÑADA. BE AS SPECIFIC AS YOU CAN IN TERMS OF TUTORING, CHILDCARE, REDUCTIONS IN WORK SCHEDULE, CHANGE IN MAJOR, OR OTHER FACTORS THAT Affected YOUR ABILITY TO COMPLETE YOUR CLASSES.

STUDENT SIGNATURE _____

FOR OFFICE USE ONLY

REQUEST APPROVED REQUEST DENIED REQUEST PENDING

_____ TERM _____ YEAR

REQUEST DENIED

REQUEST PENDING

CONDITIONS:

CONDITIONS:

FOLLOW CURRENT SEP UPDATE SEP MAKE SAP NO LOANS OFF PROBATION

OTHER OTHER

OTHER

OTHER

COMMENTS: *None*

SIGNATURE: _____
Director of Financial Aid – Vera Quijano