

VENTURA COLLEGE

SET YOUR COURSE

FINANCIAL AID OFFICE

4667 TELEGRAPH ROAD, VENTURA, CA 93003

PHONE: (805) 289-6369

www.venturacollege.edu/finaid

FINANCIAL AID SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL – 2nd Level

☐ FALL 2017

☐ SPRING 2018

☐ SUMMER 2018

Name: _____

Student ID: _____

The Second Level SAP Appeal is for students who:

- were denied a SAP Appeal or Appeal to Extend during the current term and,
- are providing additional justification and/or supporting documentation not originally included in the SAP Appeal or Appeal to Extend

Second level appeals are reviewed on a case-by-case basis. This process may take up to 3 weeks to complete from the date submitted. You will receive notification outlining the decision of your appeal.

Instructions: Please complete this form by answering the questions listed below and providing all appropriate documentation to support your appeal. *Please attach separate sheet(s) if additional space is needed.* First level appeals will be included with this request. Incomplete appeals will delay the second level appeal process.

APPEAL DEADLINES

Fall 2017: November 14, 2016

Spring 2018: April 10, 2017

Summer 2018: July 10, 2018

1. Do you have any additional information/justification that was NOT included in your first appeal? ☐ Yes ☐ No

If yes, please explain in the space provided below.

2. Are you attaching any additional support documentation that was NOT included in your first appeal? ☐ Yes ☐ No

READ AND INITIAL EACH ITEM BELOW:

_____ I understand that by submitting this appeal form, approval is not guaranteed.

_____ I understand that, if approved, this appeal does not guarantee approval for Federal Direct Student Loans.

_____ I understand that if my Board of Governor's Fee Waiver (BOGW) has been revoked, this appeal will not reinstate it. A separate appeal will need to be submitted for BOGW reinstatement.

_____ I certify the information contained in this appeal form, supporting documentation, and statements of circumstances are accurate and complete to the best of my knowledge.

_____ I have completed a Student Educational Plan (SEP) with an academic counselor at Ventura College.

_____ I understand any false information will be cause for denial, reduction, and/or repayment of financial aid.

Signature: _____

Date: _____