

Date: _____



Nebraska Indian Community College
PO Box 428; 1111 Highway 75; Macy, NE 68039
"Accredited by the Higher Learning Commission."

Financial Aid Appeal Form

Name _____ Student ID. # _____

1. What degree are you planning to pursue? _____

2. What outside school commitments do you have? _____

3. Please give an explanation of the activity that caused your low GPA or low completion rate (SAP) i.e. death in the family, injury or illness, or other special circumstances:

4. What has changed in your life that will allow you to be successful in school?

5. Actions you would like taken to resolve the appeal: **Probation with an academic plan**

Please feel free to continue with any of the above on back. Also, please attach any relevant documentation i.e. obituaries, medical notes, or other documents that support your reason in #1. Make a copy for yourself and turn in **original to the Registrar or Dean of Student Services.**
