



## Financial Aid Suspension: APPEAL INSTRUCTIONS

A student failing to meet the standards set forth in Ozarka College's federally mandated policy for Satisfactory Academic Progress (see the [SAP policy](#) on Ozarka's Financial Aid web site) will be placed on Financial Aid Suspension, and will lose eligibility for financial aid (i.e.: Pell Grants, Student Loans, other grants and scholarships).

A student on financial aid suspension may petition the school for reconsideration of Federal Student Aid eligibility by filing an appeal with the Financial Aid Officer. The appeal should clearly identify any extenuating circumstances leading to the student's failure to meet the SAP policy standards.

The Financial Aid Appeals Committee reviews appeals on a case-by-case basis.

- If the appeal is approved by the Committee, the student will be on financial aid probation, eligible for federal aid the next semester of attendance.
- If the appeal is denied by the Committee (or if the student chooses NOT to submit an appeal), aid eligibility can be re-gained if the student self-pays for classes in the next semester of enrollment, and achieves the SAP policy standard for aid eligibility.

### **REQUIRED TO APPEAL (IMPORTANT INSTRUCTIONS):**

1. A current year FAFSA on record with Ozarka Financial Aid.
2. Enrollment in an aid-eligible degree program (Technical Certificate or Associates degree level.)
3. **A COMPLETE APPEAL APPLICATION: Submit your \*COMPLETE\* Appeal Packet to the Financial Aid Office as soon as possible after you have been notified of your Financial Aid Suspension.**

**“COMPLETE”:** ALL documents (see checklist on page 2) received by Financial Aid **TOGETHER in ONE** submission. **INCOMPLETE** packets will be automatically returned to the student by mail **DENIED**. **Students will be allowed one resubmission.**

4. **SUBMISSION DEADLINE POLICY:** The earlier the COMPLETE appeal is submitted, the sooner you will receive the committee decision regarding your aid eligibility for the next semester you plan to attend. **The deadline for submitting a complete appeal is Wednesday prior to the published first day of classes of the semester you plan to enroll.**
5. **APPEAL DECISION:** The Committee will review the application packet and render a decision within 3 weeks of submission. You will be notified by mail and by email of the Committee's decision.



## Financial Aid Suspension Appeal Personal Statement OUTLINE

*Your personal statement should be typed and meet the following criteria:*

- I. Explain the circumstances that contributed to your inability to make satisfactory academic progress, resulting in your financial aid suspension.
- II. Explain how your circumstances changed since that semester.
- III. Explain how you will ensure that you will be successful the next semester you attend.
- IV. State your academic and career goals.

---

### **SUPPORTING DOCUMENTATION:**

**DOCUMENTATION MUST SUPPORT YOUR PERSONAL STATEMENT** (Call or email Financial Aid if you have questions about acceptable documentation. 870-368-2009 or [FinAid@ozarka.edu](mailto:FinAid@ozarka.edu))

Acceptable support documents will be from a reliable source and back up the information provided in your personal statement as a major factor affecting your ability to complete your courses successfully. **Strong documentation might include:**

- Medical records (if your reason was related to health issues, birth of a child, etc)
- Newspaper obituary, death certificate, etc (if your reason involved a death in your family)
- Signed letter of support from a personal contact who witnessed your circumstances at the time and knows what has changed for you. (For example, a pastor, a teacher, counselor, doctor, etc.)

---

### **APPEAL APPLICATION CHECKLIST:**

- \_\_\_\_\_ Completed Appeal form (at the top of PAGE 3).
- \_\_\_\_\_ Your personal statement. (Follow outline at the top of this page)
- \_\_\_\_\_ **REQUIRED: SUPPORTING DOCUMENTATION**
- \_\_\_\_\_ YOUR degree completion plan, signed by an Academic Advisor at Ozarka College, that shows you have a plan to complete your program, and that you understand what it will take to succeed and graduate.

***INCOMPLETE Applications WILL be returned to the student immediately.***



Financial Aid Suspension Appeal Form

Form with fields for Student Name, Mailing Address, City, State, ZIP, Degree, Last 4 digits SS, Ozarka Student ID#, Phone #, Email Address, Birthdate, and Academic Advisor.

Extenuating circumstances leading to financial aid suspension: Check all that apply. In your personal statement, explain each item that you checked below, and explain how things have changed in that regard. If "Other," please fill in a reason.

- Changed my academic and career goal
Unprepared for rigors of college courses
Illness or death of a family member
Work schedule change
Divorce or other relationship stress
Disruptions due to COVID-19 Pandemic
Lack of childcare
Illness/physical limitations
Relocation
Personal finances
Lack of transportation
Other

"My signature below indicates (1) my commitment to put forth my best effort in my next semester of enrollment; and (2) that I understand my appeal will be AUTOMATICALLY RETURNED TO ME if I did NOT submit a complete appeal packet."

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

APPEAL COMMITTEE RULING SECTION (FOR COMMITTEE USE ONLY)

Date received: \_\_\_\_\_ Current FAFSA on file: Y N Registered for classes? Y N

Overall GPA: \_\_\_\_\_ Attempted credit hours: \_\_\_\_\_ Completed credit hours: \_\_\_\_\_

Documentation provided:

Application Personal statement Degree Plan signed by advisor Supporting docs

Committee Member: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

If denied, reason for the denial: \_\_\_\_\_

Committee Member: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

If denied, reason for the denial: \_\_\_\_\_

Committee Member: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date: \_\_\_\_\_

If denied, reason for the denial: \_\_\_\_\_

Date Decision Letter Sent: \_\_\_\_\_

