

FINANCIAL AID OFFICE

WEST LOS ANGELES COLLEGE

APPEAL FOR REINSTATEMENT FOR FINANCIAL AID

_____ Appeal for 20____
Student Name SS# Date

Instructions:

Please explain the reason(s) you feel we should review your disqualification from financial aid. Include any special circumstances which were out of your control, and attach any documentation you feel supports your appeal.

Mandatory:

If your disqualification from financial aid is due to non-satisfactory academic progress, a Student Education Plan (SEP) must also be completed. Meet with a Counselor to discuss your goals and define those goals on the SEP form and attach it to this petition.

TO BE COMPLETED BY STUDENT:

Please review my file for financial aid eligibility. The reasons for the appeal are:

Explain any changes you have made which will assist you in attaining your educational goal:

Student Signature

Date

