



## 2021-22 Appeal for All Aid

### STUDENT INFORMATION PAGE 1 OF 2

Student Name \_\_\_\_\_ AU Student ID \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Degree:  Undergraduate  Graduate

Aurora University is required to monitor whether or not students are maintaining Satisfactory Academic Progress (SAP) in their course of study in order to comply with federal regulations. You are currently not eligible for any federal, state, or institutional financial aid. To be considered for financial aid probation, you must submit this form, your written appeal letter, AND supporting documentation. **Completion of this process does not guarantee that your financial aid will be reinstated.** Please note that academic or admission reinstatement does not constitute reinstatement of financial aid eligibility. If you have an outstanding balance, your appeal will be reviewed once paid in full.

### SECTION 1: GENERAL APPEAL INFORMATION

I choose to appeal the suspension of my financial aid for the selected semester(s):

- SUMMER 2021       FALL 2021       SPRING 2022
- SUBMISSION DATE: MAY 3, 2021      SUBMISSION DATE: AUGUST 23, 2021      SUBMISSION DATE: JANUARY 3, 2022

### SECTION 2: APPEAL REASON AND DOCUMENTATION

Indicate below which situation applies to your academic difficulty. ALL appeals must have supporting documentation.

Appeal Reason	Required Documentation
<input type="checkbox"/> Medical Issue	Documentation from medical professional verifying medical problems experienced and treatment received
<input type="checkbox"/> Death of Family Member	Death certificate and/or obituary
<input type="checkbox"/> Traumatic Life-Altering Event, such as Fire, Tornado, etc.	Evidence of event such as insurance claim or FEMA application
<input type="checkbox"/> Other: _____	Appropriate documentation to verify situation

**Note:** Circumstances related to the typical adjustment to college life such as working while attending school, financial issues related to paying bills, and car maintenance/travel to campus are not considered extenuating circumstances for purposes of appealing the suspension of financial aid.

To return this form: Secure Document Uploader: [aurora.edu/submitfinaidforms](http://aurora.edu/submitfinaidforms)

Fax: 630-844-6191 | Mail: Office of Financial Aid, 347 S Gladstone Ave, Aurora, IL 60506 | In Person: Eckhart Hall, Room 324

Questions: Email: [finaid@aurora.edu](mailto:finaid@aurora.edu) | Phone: 630-844-6190

Note: Documents submitted via email cannot be accepted due to security reasons.

Provide a letter explaining the circumstances that contributed to your academic difficulty as well as how you will perform better academically in the future. As a guideline, include the following information:

1. The circumstance affecting your academics
2. When the circumstance occurred
3. The duration of the circumstance
4. How the circumstance affected your ability to complete your coursework
5. What has changed in your situation to allow you to be academically successful
6. Specific steps you will take to assure the university of your future academic success

**CERTIFICATION:**

- To the best of my knowledge, all of the information provided with this form is true and complete. I agree to provide additional proof of the information submitted in my appeal if requested in the review process.
- I have read and understand Aurora University’s Satisfactory Academic Progress policy located on the Aurora University website at [aurora.edu/satisfactoryacademicprogress](http://aurora.edu/satisfactoryacademicprogress).

\_\_\_\_\_  
Student Signature →**Must be drawn and not typed.**

\_\_\_\_\_  
Date

**For Office Use Only:**

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- |   |  |
|---|--|
| <input type="checkbox"/> Approved Term-By-Term (2.0 Term GPA) | <input type="checkbox"/> Re-evaluate after summer grades submitted |
| <input type="checkbox"/> Approved Term-By-Term (3.0 Term GPA) | <input type="checkbox"/> Denied (No Aid)                           |
| <input type="checkbox"/> Approved Term-By-Term (Quantitative) | <input type="checkbox"/> Approved for the year                     |

Denied Schol \_\_\_\_\_ ; will receive \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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