Scholarship Appeal Form

_________________________________________  ________________________
NAME  STUDENT ID #

___________________  ________________________
PHONE  EOU-EMAIL  DATE

SCHOLARSHIP(S) APPEALING: ____________________________________________

_________________________________________  ______________________
_________________________________________  ______________________

PLEASE READ: Scholarship recipients at Eastern are required to meet eligibility requirements in order to have their awards renewed. These requirements are always noted in the initial award offer letter. For most Institutional scholarships the minimum requirements to renew are to maintain a 3.0 cumulative GPA and earn 45 EOU-credit hours per regular academic year (fall, winter, and spring). An exception can be made if credits earned while in high school, are included.

For credit hours earned:
- By end of freshman year: must complete 45 total credit hours
- By end of sophomore year: must complete 90 total credit hours
- By end of junior year: must complete 135 total credit hours

Academic progress is reviewed after spring term: the concluding term of the current aid year. Upon request, the Financial Aid Office will take into consideration, summer grades for students who did not meet the eligibility requirements at the end of spring quarter.

**Appeal Process:**

Students who were unable to meet the scholarship renewal criteria are encouraged to complete this form and attach any required supporting documentation, and return it to:

Eastern Oregon University
Attn: Scholarship Coordinator
Financial Aid Office - Inlow Hall, Suite 104
La Grande, OR 97850
Appeal Categories:

☐ **My GPA has fallen below the renewal requirement:**

- You may appeal for reinstatement of your award(s) after spring term is complete
- **Year-end appeals are due by August 31st at 5pm to ensure funds may/may not be forgiven**
- Attach a typed statement indicating the circumstances you encountered consequently leading you to not maintaining renewal requirements.
- The typed statement must include (if any) the solution you plan to pursue to gain back your award(s)
- Attach any and all necessary documentation that may support your extenuating circumstances which supports your statement and will assist in the review process

☐ **I did not meet or complete the required year-end credit hours for renewal:**

- You may appeal for reinstatement of your award(s) after spring term is complete
- **Year-end appeals are due by August 31st at 5pm to ensure funds may/may not be forgiven by the start of the new aid year**
- Attach a typed statement indicating the circumstances you encountered consequently leading you to not maintaining renewal requirements.
- The typed statement must include (if any) the solution you plan to pursue to gain back your award(s)
- Attach any and all necessary documentation that may support your extenuating circumstances which supports your statement and will assist in the review process
Appeal Categories:

☐ I did not fulfill full-time enrollment in a given term OR through the current aid year:

- Term appeals are due by the last day of the term you’re appealing, at 5pm to ensure funds may/may not be forgiven for the following term
- Attach a typed statement indicating the circumstances you encountered consequently leading you to not maintaining renewal requirements.
- The typed statement must include (if any) the solution you plan to pursue to gain back your award(s)
- Attach any and all necessary documentation that may support your extenuating circumstances which supports your statement and will assist in the review process

☐ Requesting a hold for a break in enrollment:

- Hold appeals are due three weeks prior to the term in question
- Attach a typed statement indicating the reason why you are placing a hold on your enrollment
- The typed statement must include (if any) the solution you plan to pursue to gain back your award(s)
- Attach any and all necessary documentation, including support from any third party persons (academic advisor, medical professional, employers) that may support your extenuating circumstances which supports your statement and will assist in the review process

Certification Statement

All of the information provided on this form with the submission of this appeal, is true and complete to the best of my knowledge. If necessary, I agree to provide further documentation and evidence of the information I have provided. I am aware that the submission of these appeal documents does not guarantee reinstatement of my award(s).

Student Signature: _______________________________________________________________

Date: _______________________________