Chippewa Valley Technical College Request for Academic or Financial Aid Appeal

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All students dismissed from CVTC : Financial Aid suspension to have the			o the College. All students may appeal their
☐ I am appealing my Academi☐ I am appealing my Financial☐ I am appealing both Financial☐ I am appealing my Academi☐ I am appealing my Financial☐ I am appealing my Financial☐ I am appealing both Financial☐ I am	Aid suspension (appea	al immediately)	
If you wish to appeal your Academic information/documentation within the state of t		ancial Aid suspension, you mus	t submit this form and the following
An explanation of the specific c have addressed the problem to e			emic or financial aid standards and how you
Appeal website to access a train	ing video for completing video for completing (es) below and attached attached by the completion of the completion of the complete in the completion of the	ng an academic or financial aid a	Refer to the Academic and Financial Aid appeal. ntation is not submitted and does not
obituary is required. Medical condition which re including the dates of illnes Family, financial, or legal s health care provider, friend, Other (career choice, degree	sulted in the inability to s, admission to the hosp tuation that impacted y faculty, or other advoce focus, time management	o attend class or make contact to pital, or a signed letter from the your ability to succeed. A stater cate) is required. ent, etc.) Provide documentatio	randparent). A copy of the death certificate or drop/withdraw. Medical documentation doctor is required. nent from a third party (family member, nof steps you have already taken to address edu) website for CVTC resources.
☐ I have checked with the Cashier until all financial holds are cle		Il account receiveable holds. (P	lease note an appeal cannot be submitted
If you were dismissed more than one decision will be communicated with			-
	Fall	April 1	
	Spring	July 1	
	Summer	November 1	
*I	Deadline for appeal sub	mission is 3 business days prior	to the desired term.
administration. If your appeal is app	roved and reinstatement and of the next term of en	at granted, you are obligated to represent to ensure that you me	s comprised of representatives from College neet the requirements of your success plan. t all requirements. If your appeal is denied,
Complete the student contact inform	ation in the space below	w, and address the questions/sta	tements that follow.
Last Name	First	& Middle Name	CVTC Student Identification Number
PO Box/Street Address		Home/Contact Telephone Number	
	City State Zip		Academic: Financial: Month/Year of Dismissal from CVTC
Program Enrolled in at Time of Dis	missal New	Program of Interest if Reinstated	Academic: Financial: Preferred ReinstatementTerm (Fall/Spring/Summer)
Yes No		nancial:	
Is This Your First Appeal?	If No, Term of Previous Appe	eal	Email Address

OBSTACLES

Self reflect on the following items that may have been a barrier to your success the past two semesters. Use the information on pages 2-3, along with the College Planning & Preparation (resources.cvtc.edu) website, to assist you in answering the questions on page 4.

Learning Habits	☐ May lose job	Degree Focus
☐ Too much	Conflicts with the job	Core requirements
TV/Internet/Games	☐ No part-time work	Academic Policies
Too much social life	available	GPA requirements
Overextended in my	Conflicts at work	Parental pressure
	Other	Other pressure
Use cell phone too		Classes unavailable
much	Personal	Classes at conflicting
☐ Inadequate computer	Stressed all the time	times
skills	Cultural pressures	Classes/schedule not
Failure to listen to	Relationship	convenient
staff/faculty	worries/problems	Poor class selection
Other	Loss of family	Selecting a program
	member or friend	Program/Major not
Social Support	Depression	offered
Significant	Substance abuse	Unclear education
other/Children	Rape or assault	goals
problems	Health/Medical	Unhappy with
Household obligations	worries	program
Roommate problems	Illness	Other
	Housing problems	
Socially	Value conflicts	A andomia/Study Skills
uncomfortable/shy Parental pressure	<u>—</u>	Academic/Study Skills Learning disability
	Transportation issues	
Physical abuse	Commitment	Poor study habits
Divorce or Separation	Commuting	Poor note-taking skills
New Marriage	Negative attitude	Poor concentration
New independent	Emotional abuse	Poor time
status	Pregnancy	management
Family health	Family	☐ Poor study
problems	Issues/Concerns	environment
Loneliness	Lack of	☐ Ineffective studying
Being Single	computer/internet	time
Other	Lack of phone	High anxiety
	Lack of transportation	Inadequate preparation
Financial	Other	Poor academic
Worried about money		advising
Financial aid		Failure to ask
requirements	Prior Experience/	questions when
Inadequate Financial	Perceptions	working with
aid	Previous failure	staff/faculty
Spouse not working	Not being perfect	Other
Too many debts	Accomplishments	
☐ Time limit on school	Pressures	Reading Confidence
funds	Success	Inadequate reading
Other	Making decisions	skills
	Making mistakes	
Work-Related	Task too difficult	Verbal Confidence
Must work to survive	Don't know who to	Inadequate writing
■ Work too many hours	contact with concerns	skills
Problems with the	Unhappy with	
boss	instructor	Math Confidence
	Impersonal instructor	☐ Inadequate math skills
	☐ Impersonal staff	
	Other	

SOLUTIONS

Solutions that are followed by an asterisk (*) indicate resources available on campus. See next page for a list of campus resources.

Learning Habits	Work Related	Degree Focus
☐ Set goals*	☐ Search for a new job*	☐ Consult with CVTC
Reward yourself	Develop problem	Academic Advisor*
Online Success	solving skills	Use College Planning
Seminars*	☐ Find a job*	& Preparation
Use to-do list	Spouse gets a job	Resources*
Time management	Change position	Consult with
workshop*	within job	instructor*
Turn cell phone off	Reduce hours working	☐ Change program*
Other	Quit job	Change schools
	Career Services	Career Planning
Social Support	seminar*	Workshop*
Discuss goals*	Other	Develop an Academic
Attend to children		Plan*
first, and then require	Personal	Other
solitude	Stress management	
Develop a routine*	workshop*	Academic/Study Skills
Delegate duties	Attend assertiveness	Use face-to-face or
Take family member	training workshop	online tutoring*
to get medical help	Meet with CVTC	Study skills seminar *
Seek help with	Student Success	Use study skill self-
communication *	Specialist *	help
Attend parenting	Seek personal	brochures/materials
classes	counseling in	Visit with Instructors*
Attend marriage or	community	Change study
family counseling	Attend group	environment
Obtain family	counseling	Study on campus
planning help	☐ Visit a medical doctor	Form a study group
Other	Join club or	Change instructors
	organization*	Ask questions during
Financial	Read self-help book	academic advising
See financial planner	Listen to motivational	Access Online Learner
See tax accountant for	tapes	Resources
deductions	Develop problem	(MYCVTC)*
Contact Student	solving skills*	☐ Know drop deadlines
Financial Assistance	Online Success	& procedures*
about loans/grants*	Seminars*	Utilize Disability
Explore credit for	Take semester off	Services*
prior learning	while working on	☐ Meet with Diversity
options*	problems	Services Specialist*
Consider part-time	Say NO!	Test Anxiety
schooling	Car pool/ride bus	Seminar*
Meet with CVTC	Change housing	Watch an online
Financial Coach*	situation	technology support
GradReady	Other	seminar*
(MYCVTC)*		Schillar.
Other		

SELF-EVALUATION

Please address the following questions/statements. Briefly describe your situation/circumstance in complete sentence format.

1. **CIRCUMSTANCES:**

Describe the circumstances (death of an immediate family member, medical condition, family, financial, legal situation) that may have contributed to your academic difficulties. If your circumstances are categorized as "OTHER" (career choice, degree focus, time management, etc.), describe WHY these circumstances contributed to your academic difficulties. Attach documentation to support your circumstances and steps you have taken to address the situation, and achieve your educational goals at CVTC.

Documentation may include, but is not limited to, a letter from your employer supporting changes in work schedule or flexibility with your school schedule, a transcript from another college identifying successful completion of courses, or an attendance verification of Student Services resources utilized. Examples include, College Success Seminars you have attended or watched online, Career Assessment completed, time spent in Adult Education Services, appointment with an academic advisor or Student Success Specialist, or communication with other CVTC staff or faculty. Documentation could also include a letter from a case manager, agency counselor, or CVTC staff member verifying actions taken to address your circumstance. Please feel free to add additional pages if more space is needed.

2.	CHANGING YOUR HABITS: Identify and list a minimum of three items in your self evaluation that you believe will help you manage life circumstances and improve performance in your classes if reinstated to the College.
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	2
	3.
3.	CAMPUS RESOURCES: Identify and list a minimum of three campus resources you will use to assist you in identifying solutions and overcoming barriers if reinstated to the College. See College Planning & Preparation (resources.cvtc.edu).
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	2
	3.
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	How will the changes described above increase the likelihood that you will succeed if given another opportunity? Please be very specific and detailed in your response. Please feel free to add additional pages if more space is needed
	make a copy of the completed appeal and keep for your records before submitting this form and ation/documentation of circumstances to:
By Ema	ail: academic_standards@cvtc.edu

*To send electronically, please "save as" to your computer and then attach to email.