



AVE MARIA UNIVERSITY

Office of Financial Aid

5050 Ave Maria Blvd, Ave Maria, FL 34142-9505 • 239-280-1669 *tel* • 239-280-2559 *fax*
AMUFinancialaid@avemaria.edu

Florida Student Scholarship and Grant Programs Appeal Form

A student who lost eligibility for any of the state scholarships or grants (Bright Futures, FRAG) and is able to demonstrate that it was due to extenuating circumstances such as an illness, death in the immediate family or other emergency, has the opportunity to appeal the loss of the award. Please submit with this from the required documentation listed below to our office. Submission of this appeal does not guarantee reinstatement of the award as the appeal is subject to approval by a committee. You will be contacted via e-mail with a decision once it has been reached. For renewal requirements please visit, www.floridastudentfinancialaid.org.

Student Name: _____

Semester & Year _____

Check all that apply:

- I am appealing the loss of my **Bright Futures** scholarship due to GPA and/or credit hour deficiency.
- I have dropped a course/courses and I am requesting an **exception for the repayment** to the Bright Futures scholarship.
- I am appealing the loss of my **Effective Access to Student Education Grant (EASE)** due to GPA and/or credit hour deficiency.
- Use the **credits I earned** at my previous institution to fulfill my credit hour requirement.
- Include my dual enrollment GPA** with my AMU GPA when reporting my grades.

Return this form with a **letter of explanation** and **official supporting documentation**. Your appeal must address one of the following issues:

- Personal illness or injury (must provide written statement from your physician)
- The death of an immediate family member (must provide copy of death certificate)
- Extenuating circumstances that were clearly beyond your control

The letter of explanation should explain in full detail what caused you to not meet the minimum renewal standards for the scholarship or the reasons why you are requesting an exception for the repayment of the dropped course

For Use by Office of Financial Aid ONLY:

Please Fax or e-mail completed form and supporting documents to the Office of Financial Aid

Received: _____

Submitted to OSFA: _____

Meeting Date: _____ Committee Decision: _____

Cum GPA: _____ Informed Student: _____