

## 150% Rule Appeal Form

Student Name \_\_\_\_\_ Student ID/SS No. \_\_\_\_\_

Student Address \_\_\_\_\_  
Street Address City State Zip Code

Academic Program \_\_\_\_\_ Contact Phone No. \_\_\_\_\_

Number of remaining credits needed for Academic Program completion \_\_\_\_\_

Estimated date of Academic Program completion \_\_\_\_\_

\_\_\_\_\_  
 Signature of Academic Program Counselor (located in Room S203) Date

**The 150% Rule means that you are eligible for financial aid while attempting no more than 150% of the number of credits needed to graduate from your academic program of study.**

Please provide a brief written statement explaining why you were unable to complete your academic program within the 150% timeframe. Explain, in detail, the steps that you have taken to assure the timely completion of the remainder of your academic program. Please attach any legal or medical documentation that may support your case. You **must** attach a copy of your academic plan signed by your counselor. ***Make sure the academic program counselor checks off the classes that you are required to complete on your academic plan, sign the 150% Appeal Form, and attach the academic plan. The academic plan verifies and identifies the classes that you are required to complete in order to graduate from your academic program. You are then required to submit all of the documents to the Financial Aid Office for review. The Financial Aid Office decision in regards to your 150% Appeal is final. There is no further appeal process.***

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(Please continue on the other side if you need additional space.)

**I certify that the information provided on this form and in my written statement and other attached documents are true and accurate.**

\_\_\_\_\_  
**Student Signature** **Date**

**Note: Allow 2 weeks for processing. You will be notified via your MATC student e-mail regarding the status of your 150% Appeal. You do not need to call the Financial Aid Office regarding the status of your 150% Appeal. It is your responsibility to carefully read the content of all e-mails and information that you receive from the Financial Aid Office.**

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**Program Credits** \_\_\_\_\_ **x 1.5 = 150% which =** \_\_\_\_\_ **credits. Attempted Credits** \_\_\_\_\_  
FOR FINANCIAL AID OFFICE USE ONLY

Granted \_\_\_\_\_ Restrictions: \_\_\_\_\_

Denied \_\_\_\_\_ Reason for Denial: \_\_\_\_\_

Date completed and sent to be scanned to FA Notify/FA End: \_\_\_\_\_ FA Coordinator: \_\_\_\_\_