

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

**2020-2021 SCHOLARSHIP APPEAL FORM – REINSTATEMENT OF ELIGIBILITY**

STUDENT NAME \_\_\_\_\_

NU ID \_\_\_\_\_

*Students who do not meet established scholarship renewal criteria have the opportunity to appeal on the basis of relevant, significant, and document-able extenuating circumstances for which they could not plan, influence, or prevent. In addition, students requesting a leave of absence (e.g., military obligation, religious mission service, internship, medical complication, etc.) must also appeal for consideration.*

Submit this form, along with the items listed below, to the Office of Scholarships and Financial Aid per the term deadlines listed below:

**Fall: September 1, 2020**

**Spring: February 1, 2021**

Please list the Scholarship Program(s) administered by the Office of Scholarships and Financial Aid and/or the Office of Undergraduate Admissions to which you are appealing and check the box of the appeal situation that applies to you.

Scholarship Program(s): \_\_\_\_\_

I am appealing for **reinstatement of eligibility** for the following term(s):      Summer 2020      Fall 2020      Spring 2021

Submit this form with:

**1. A Typed Narrative, written by the student that includes the following:**

- a. Outline specific circumstances that have caused you to become ineligible for scholarship renewal.
  - i. Discuss circumstances throughout your academic career for which you could not plan, influence, or prevent. Do not limit your narrative to events in the most recent semesters. It is suggested that you review your academic record and explain the reasons for any failing grades, withdrawals, and incompletes.
  - ii. Outline specific steps you are now taking to address these circumstances.

**2. Supporting Documentation:**

- a. Provide relevant documentation whenever possible (e.g., a letter of prognosis from a physician, counselor, licensed professional, etc.).

**Important Notes:**

- Appeals are only reviewed for scholarship selections made by the Office of Scholarships and Financial Aid and/or the Office of Undergraduate Admissions.
- Please allow the Scholarship Appeal Committee 3-4 weeks to review and consider your appeal after all necessary supporting documentation has been received.
- This appeal form must be signed by the student or uploaded through MyRed
- The appeal narrative must be written by the student.
- Most documents can be scanned and uploaded into MyRED (Click on the Financial aid tab, then in the upper right-hand corner is the Upload Documents button.)
- Students enrolled in Co-Op courses do not need to request a leave of absence if working in coordination with the College of Engineering Career Development & Academic Advising Coordinator.
- Scholarship Appeal decisions are final and not subject to further review.

I acknowledge the terms and conditions of appealing for scholarship reinstatement and the information I have provided is true and accurate to the best of my knowledge.

STUDENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

(Signature not required if uploaded in MyRED)

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**Extenuating Circumstances and Documentation**

<p><i>Extenuating Circumstance should have occurred within the academic year that caused the student to not meet the renewal criteria for their scholarship(s).</i></p>	<p><b>Recommended Documentation – Submit at least <i>one type</i> of documentation</b></p>
<p><b>COVID-19 Related</b> extenuating circumstances that took place after March 13, 2020 ( date when UNL moved to remove learning</p>	<p>If your particular circumstance is not listed here and there is no third party who can provide a supporting document, please ensure your letter of appeal best describes what took place and when and how the issue was resolved</p>
<p><b>Medical Condition:</b> Serious illness, dental emergency, change in health status, surgery, hospitalization or mental health issue</p>	<ul style="list-style-type: none"> <li>▪ Letter from health care provider/or other licensed professional with advised period of recovery, dates of office visits.</li> <li>▪ Medical Records</li> </ul>
<p><b>Student’s Immediate Family:</b> Child or parent medical condition (if parent, student needs to provide documentation that he/ she was required to care for parent).</p>	<ul style="list-style-type: none"> <li>▪ Records from doctor visits</li> <li>▪ Letter stating doctor advised period of recovery</li> <li>▪ Hospitalization records</li> </ul>
<p><b>Death of Family Member</b></p>	<ul style="list-style-type: none"> <li>▪ Obituary or death certificate</li> <li>▪ Letter from counselor</li> </ul> <p><i>(Documentation should include date and indicate relationship to the deceased.)</i></p>
<p><b>Housing Issues</b></p>	<ul style="list-style-type: none"> <li>▪ Letter from Resident Director</li> <li>▪ Eviction notice</li> <li>▪ Letter from transitional housing program</li> </ul>
<p><b>Family Issues</b></p>	<ul style="list-style-type: none"> <li>▪ Letter from therapist or other licensed professional</li> </ul>
<p><b>Assault or Domestic Violence</b></p>	<ul style="list-style-type: none"> <li>▪ Police Report</li> <li>▪ Court Documentation</li> <li>▪ Letter from clergy, social worker, licensed professional or doctor</li> </ul>

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