

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

2021-2022 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, 2021

Spring: February 1, 2022

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 2021 Fall 2021 Spring 2022

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. Provide relevant documentation whenever possible (e.g., a letter of prognosis from a physician, counselor, licensed professional, etc.).
 - iii. Outline specific steps you are now taking to address these circumstances.

2. Your Two-Semester Academic Plan on the academic advising form (see page 2)

3. A copy of your Unofficial Transcript. This can be obtained in your MyRED account under: Academics > Unofficial Transcript > add UNL to academic institution > add Unofficial Transcript to Report type, then click view report.

4. Supporting Documentation such as letter of prognosis from 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.
- Two-Semester Plan must be signed by Academic Advisor
- The appeal narrative must be written by the student.
- Most documents can be scanned and uploaded into MyRED (Financial Aid Tab)
- 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.
- Non-renewal of a Nebraska Career Scholarship cannot be appealed as it is a program approved by the Nebraska Legislature with statutory minimum requirements for renewal that cannot be overridden by the University through an appeals process (exceptions apply, for example, in the case of a grade change or correction made on your academic transcript).

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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ACADEMIC ADVISING FORM

To be completed with an Academic/Faculty Adviser

STUDENT NAME _____ NU ID _____

INTENDED MAJOR _____ Date _____

ANTICIPATED DEGREE COMPLETION DATE _____ CREDITS REMAINING IN PROGRAM _____

Please provide your **Two – Semester Academic Plan**

Summer 2021	
COURSE LIST	CREDITS
TOTAL CREDITS	

Fall 2021	
COURSE LIST	CREDITS
TOTAL CREDITS	

Spring 2022	
COURSE LIST	CREDITS
TOTAL CREDITS	

Place an asterisk () next to repeated coursework or two (**) if the student was already enrolled prior to advising appointment.*

The student was advised to access the following resources or strategies to improve his/her academic record:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Success Workshop(s) | <input type="checkbox"/> The Study Stop | <input type="checkbox"/> Probation Recovery Program | <input type="checkbox"/> CAPS Services Remedial |
| <input type="checkbox"/> Reduced Course Load | <input type="checkbox"/> Reduced Work Hours | <input type="checkbox"/> Repeat Courses | <input type="checkbox"/> Coursework |
| <input type="checkbox"/> Change of Major | <input type="checkbox"/> Back Up Plan | <input type="checkbox"/> Referral (e.g., housing/transportation services/social services) | |

Please complete and review the Academic Plan with the student. If meeting remotely, the academic advisor should complete all parts of the academic plan, provide a copy to the student and then email a copy to financialaid@unl.edu attention Scholarship Appeal.

The courses listed above are required for your degree program at UNL. We discussed your specific needs, including a realistic plan to be academically successful, and what you need to accomplish to meet the renewal criteria for your scholarship in the future.

ACADEMIC ADVISOR NAME (PRINT)

SIGNATURE (Not required if emailing document from UNL email account)

DATE

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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>Recommended Documentation – Submit at least <i>one type</i> of documentation</p>
<p>Medical Condition: Serious illness, dental emergency, change in health status, surgery, hospitalization or mental health issue</p>	<ul style="list-style-type: none"> ▪ Letter from health care provider/or other licensed professional with advised period of recovery, dates of office visits. ▪ Medical Records
<p>Student’s Immediate Family: 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"> ▪ Records from doctor visits ▪ Letter stating doctor advised period of recovery ▪ Hospitalization records
<p>Death of Family Member</p>	<ul style="list-style-type: none"> ▪ Obituary or death certificate ▪ Letter from counselor <p><i>(Documentation should include date and indicate relationship to the deceased.)</i></p>
<p>Housing Issues</p>	<ul style="list-style-type: none"> ▪ Letter from Resident Director ▪ Eviction notice ▪ Letter from transitional housing program
<p>Family Issues</p>	<ul style="list-style-type: none"> ▪ Letter from therapist or other licensed professional
<p>Assault or Domestic Violence</p>	<ul style="list-style-type: none"> ▪ Police Report ▪ Court Documentation ▪ Letter from clergy, social worker, licensed professional or doctor
<p>Other</p>	<ul style="list-style-type: none"> ▪ Provide supporting documentation for any other extenuating circumstances

The University of Nebraska does not discriminate based on race, color, ethnicity, national origin, sex, pregnancy, sexual orientation, gender identity, religion, disability, age, genetic information, veteran status, marital status, and/or political affiliation in its programs, activities, or employment. UNL is dedicated to the prevention of sexual discrimination, sexual harassment, and sexual misconduct, and providing a safe campus for its employees and students. Responsible Employees (RE) are individuals working at UNL who have an obligation to inform the Title IX Coordinator of allegations of such instances. Visit <http://www.unl.edu/equity/title-ix> for more information.