

**Bunker Hill Community College  
Financial Aid  
SAP Appeal Form  
2015-2016**

NAME _____	DATE _____
Please print	
ADDRESS _____	_____
Street	City State Zip
SS# _____	TEL# _____ Email _____
PROGRAM OF STUDY _____	EXPECTED DATE OF GRAD _____

**Please follow these three steps to appeal:**

1. Complete this form and return it to the Financial Aid Office. Please note your financial aid file will not be reviewed until this appeal is completed and reviewed. All materials must be submitted by **August 14, 2015.**
  
2. Attach a typed, detailed description of the reasons why you were unable to successfully complete the courses you attempted. These circumstances must be extenuating (such as medical problems, recall to military duty or death of immediate family member or partner) A note from your health care provider must accompany all medical excuses. ALSO, describe how circumstances have changed so that you are in a better position to be academically successful.
  
3. Attach your completed academic plan. Instructions for completing an academic plan are attached to this form. If your appealed is approved, you must follow your academic plan to avoid future appeals.

Please Remember:

- Incomplete forms or forms without the appropriate documentation will not be accepted.
- Submit your appeal for the deadline
- **Transcripts with IP grades can not be reviewed.** You must complete any IP grades before submitting this appeal form.
- Sign and date this form.

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

Mail to: Bunker Hill Community College  
Office of Financial Aid  
250 New Rutherford Ave  
Boston, MA 02129

Scan & email to: [finaid@bhcc.mass.edu](mailto:finaid@bhcc.mass.edu)

fax to: (617) 228-3407