

PETITION FOR RESINSTATEMENT OF FINANCIAL AID

Mesabi Range Community & Technical College

PART I – TO BE COMPLETED BY STUDENT

DIRECTIONS: Federal regulations state that a student who has extenuating circumstances, such as (a) death of a relative of the student, (b) personal injury or illness of the student, or (c) special circumstances as determined by the institution, may be considered for reinstatement of financial aid.

COMPLETE AND RETURN THIS FORM ALONG WITH ALL REQUIRED DOCUMENTATION TO THE FINANCIAL AID OFFICE:

Name _____ Student ID Number _____

Address _____

City _____ State _____ Zip _____

Telephone _____ E-mail _____

Previously suspended? Yes _____ No _____ If yes, what term? _____

Intended degree/diploma/certificate _____

What is the next semester for which you intend to register? _____

REINSTATEMENT FOLLOWING NOTICE OF SUSPENSION is considered **ONLY** in extenuating circumstances **with documentation and an academic success plan.** Documentation may include written statements from a medical provider, mental health professional, judge, lawyer, or other professional source who knows firsthand and can verify your circumstances. **TELEPHONE CALLS ARE NOT ACCEPTABLE DOCUMENTATION. REQUESTS WITHOUT DOCUMENTATION AND AN ACADEMIC SUCCESS PLAN WILL NOT BE CONSIDERED.**

Completion of the following information is required as a part of your appeal to be reinstated for financial aid. The College wants to know what extenuating or serious conditions existed to cause your probation and suspension, and how you have changed the conditions so that you can be successful.

1. Please describe the extenuating circumstances which contributed to your grade point average and/or lack of progress leading to your suspension (attach as separate sheet for questions 1 and 2 with related documentation).
2. For consideration of reinstatement, state the changes you have made or how the condition(s) in question 1 have changed to eliminate the problem causing your suspension.

Student's Signature _____ Date _____

FINANCIAL AID SUCCESS PLAN

Mesabi Range Community & Technical College

Student Name _____ Student ID _____

Current Cumulative GPA _____ Current Cumulative Completion % _____

Identify those obstacles that prevented you from succeeding at Mesabi Range:

- Poor attendance
- Test-taking difficulties
- Difficulty with course content (list specific course(s) _____)
- Study skills
- Difficulty adjusting to college from high school or previous life circumstances
- Time management
- Academic rigor of program
- Financial issues
- Personal issues
- Other _____

Prior to meeting with your advisor, please answer the following questions on a separate sheet (typed) and attach to this form along with the signature of your advisor in support of your academic success plan.

1. How do the obstacles you selected above interfere with your ability to succeed academically at MRC&TC?
2. What are your solutions to overcoming these obstacles?
3. Explain how you will work with an advisor or counselor to reach your academic goals? How many times a month/semester will you meet to discuss your progress? Include specific dates.
4. Identify those resources that you will work with to support your academic success:
 - Learning Center
 - Advisors
 - Counseling
 - Tutoring _____
 - Other _____

What are your goals for the semester?

What cumulative GPA do you intend to earn by the end of the semester? _____

What cumulative % of credits completed to you intend to reach by the end of the semester? _____

Student Signature _____ Date _____

Advisor/Counselor Signature _____ Date _____

Advisor/Counselor printed name _____

Please keep a copy of this for your records.