



Office of Enrollment Management

Scholarship Appeal Form

Please complete all steps outlined on this form to appeal your scholarship ineligibility. Appeals must be submitted no later than the 14th class day immediately following the scholarship cancellation or suspension. Failure to submit documentation and follow instructions will result in a delay in the decision of your appeal. Once a decision has been reached your scholarship status on MyLSU will be updated, and you will be sent an email from our office.

Step 1: Student Information

Name (Print): _____ Student ID: _____

Scholarship Name: _____ GPA: _____

Semester Appealing: _____ Is this your first appeal? _____

Step 2: Reason for Scholarship Suspension

Please check all that apply. I am completing an appeal by answering all of the questions on this form in detail, and I am including supporting documentation for reinstatement of my scholarship. I would like to appeal my scholarship suspension because:

- I currently have a cumulative grade point average (GPA) below the minimum standards
- I have not maintained continuous fulltime enrollment
- I have not earned 24 credit hours per academic year

Step 3: Appeal Information

Scholarship ineligibility can be appealed if you have suffered undue hardship. In order for an appeal to be considered, your circumstances must meet at least one of the criteria in the chart below. Please indicate below which situation(s) best applies to the academic difficulty you experienced. In addition, all appeals must be submitted with supporting documentation. Examples of acceptable documentation are listed in the following chart. The documentation should be attached to the appeal at the time the appeal is submitted.

Check the Circumstance(s) that Apply	Required Documentation (must include dates)
<input type="checkbox"/> Severe illness, medical condition or injury	<ul style="list-style-type: none"> • Signed and dated letter from physician on office letterhead verifying medical problems experienced and treatment received; legible copy of accident
<input type="checkbox"/> Death of family member	<ul style="list-style-type: none"> • Death certificate and/or dated obituary from newspaper
<input type="checkbox"/> Traumatic life-altering event such as fire, hurricane, etc.	<ul style="list-style-type: none"> • Evidence of event such as insurance claim or FEMA application
<input type="checkbox"/> Other circumstance (Please clearly state the circumstance if not listed above): _____ _____	<ul style="list-style-type: none"> • Appropriate documentation which will verify situation



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2. List the documents below that you have attached to support your appeal for reinstatement. Please explain how each relates or supports to the circumstance(s) discussed in question #1. **APPEALS WILL NOT BE REVIEWED WITHOUT SUPPORTING DOCUMENTATION. A PERSONAL STATEMENT, DEGREE AUDIT, OR COPY OF YOUR ACADEMIC PLAN IS NOT DOCUMENTATION.**

3. Explain your plan for regaining and maintaining scholarship standards in the future.



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Certification of Information

- I certify that the information I have provided is true and complete to the best of my knowledge. I realize that giving misleading information or forged documentation will result in my being reported to the Student Advocacy & Accountability Office for appropriate disciplinary action. Furthermore, I realize that additional information may be requested by the Office of Enrollment Management to further support my appeal.
- If additional information is needed or once a final decision has been reached regarding my appeal for scholarship, I understand that I will be sent notification via my LSU email account only. Therefore, it is my responsibility to check my LSU email account frequently during this period. If corresponding through my University email account is a problem, I realize that it is my responsibility to contact the Office of Enrollment Management for further instructions.

Student's Signature: _____ Date: _____