



## Kodiak Corner/Student Financial Services

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# Appeal for Financial Aid Reinstatement

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

**Please note:** Appeals for reinstatement are reviewed **once** per quarter no later than the 100% refund deadline. If you miss the quarterly appeal deadline, your appeal will still be reviewed, but reinstatement of financial aid would be for future quarters. Appeals will only be accepted once all balances are paid.

My appeal is based on (check **only one**):

☐ **SELF-REINSTATEMENT:**

**I earned reinstatement by having a completion rate of 67% or greater for coursework taken at Cascadia College and my cumulative GPA is 2.00 or greater. (see Satisfactory Academic Progress policy).**

*\*To determine completion rate divide the total amount of credits completed by the total amount of credits attempted.*

Completed Credits / Attempted Credits	Completion Rate (%)	Cumulative GPA
_____ / _____	_____ %	____ . _____

- Sign and date this form where indicated. If you are requesting a reinstatement after the tuition deadline for the quarter, you will be responsible to pay for your own tuition for the quarter and be reimbursed if you are eligible for funding. If this is not an option, you should request reinstatement for the following quarter.

**FORM CONTINUED ON BACK PAGE**

☐ **UNUSUAL or EXTRAORDINARY CIRCUMSTANCES BEYOND YOUR CONTROL:**

*(This type of appeal is generally not approved if more than two consecutive quarters of unsatisfactory academic progress have occurred.)*

**Step 1.** Indicate the type of unusual or extraordinary circumstances beyond your control (check one):

☐ **Illness.** (Attach documentation from a medical care provider).

☐ **Death in my family.** (Attach a copy of a death certificate or funeral notice).

☐ **Other unusual or extraordinary circumstances beyond my control.**

(Documentation must be attached. Examples of documentation include, but are not limited to, the following: court documents, police reports, letter from a mental health care provider or counselor, letter from a public assistance agency, letter from a member of the clergy.) ***(Appeals without documentation are generally denied. Additional documentation may be requested by the Financial Aid Office in order to make a determination on your appeal.)***

**Step 2. Attach a signed statement** in your own words describing in detail the unusual or extraordinary circumstances beyond your control. You can use the back of this form if you wish. The statement should include:

1. What happened
2. When it happened
3. Why it happened
4. Why it is no longer a problem

**Step 3. Sign and date this form where indicated.**

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**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Cascadia College is an equal opportunity institution and does not discriminate. See full statement on the [Cascadia Policies and Procedures webpage](#).