

Financial Aid Office

Financial Aid Appeal-Program Completion Information

Student should take this form to his or her academic advisor or authorized representative within the academic department. This information will be kept in the student's SCC financial aid file and will document the classes needed for program of study completion and expected graduation date to support a financial aid appeal.

Student Info	ormation			
Name:				
SCC ID Nu	umber:			
Degree Info	rmation – To be completed by Advisor			
Advisor's I	Name:			
Hours Required to Complete Program:		Expected Gra	Expected Graduation Date:	
Credential Being Sought:		Student Cata	Student Catalog Year:	
Current Plar	n for Completing the Program of Study	·		
Term	Coursework To Be Taken	Term	Coursework To Be Taken	
		·		
Signatures				
Advisor Signa	ature:		Pate:	
Student Signature:		1	Nate:	