



2019-2020 University Administered Scholarship Appeal Form (Extenuating)

STUDENT NAME: _____ OSU ID#: _____

Students may use this form to appeal the loss of scholarship eligibility due to an extenuating circumstance. Examples of scholarships that may be appealed using this form are: merit scholarships, Morrill Scholars Program, National Buckeye, Land Grant Opportunity Scholarship and Young Scholars Program.

If you have lost eligibility for a scholarship that was awarded by a department or college, please reach out to that department or college.

Note: Unless otherwise indicated, scholarships carry a maximum of 8 semesters of eligibility. A semester of eligibility is considered used any time a student receives any university administered merit or need-based aid regardless if the particular scholarship in question is utilized during that semester or not. Exceeding this maximum, regardless of the circumstance, is not appealable.

EXTENUATING CIRCUMSTANCE APPEAL

If you experienced an extenuating circumstance such as, but not limited to, a death of an immediate family member, physical illness/injury, mental illness/injury, learning disability or extreme family or personal issues you may submit an extenuating circumstance appeal. The appeal must provide clear documentation of the circumstance as well as a concise plan of how you have remedied the situation. Absent a compelling case, clear documentation and a plan for the future, your appeal may be denied.

Once reviewed you will be notified in 7-10 business days of the decision via your university email address.

Required Documentation:

- A signed copy of this form
- Typed explanation of the circumstance and, if applicable, resolution to improve GPA
- Documentation of the circumstance
- Documentation of the resolution and/or plan going forward

SIGNATURES AND CERTIFICATION

All information on this form is true and complete to the best of my knowledge.

I understand the information I submit may be shared with university offices that have a need to know for purposes of reviewing and processing this appeal, and/or to comply with university policy or law.

Student Signature

Printed Name

Date

To return this form:

Students may upload all forms & documents to the Secure Document Uploader: sfa.osu.edu | Fax to: 614-292-9264
Mail to: Buckeye Link, P.O. Box 183029 Columbus OH 43218-3029 | Questions: 614-292-0300

Note: Do not submit this form or any supporting documents via email.

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