

## Scholarship Appeal Form

Scholarship appeals for the spring term are due by January 15<sup>th</sup> and scholarship appeals for the fall term are due by August 2<sup>nd</sup>. An appeal will not be considered until all required information is provided. Incomplete appeals and appeals submitted after the stated deadlines will not be considered.

Scholarship appeals will need to be submitted to the scholarship coordinator at [scholarship@mtech.edu](mailto:scholarship@mtech.edu) by the due dates stated.

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Major: \_\_\_\_\_

Advisor: \_\_\_\_\_

Reason for appeal:

- Severe illness of self or immediate family member  
Please check this box if you had a severe illness or you became a primary caregiver for an ill member of your immediate family member (e.g. spouse parent, or child). In order to appeal for this reason, the illness must have either caused you to miss a significant number of classes or have significantly impacted the time you were able to devote to your studies. If you check this box, please provide supporting documentation from a physician or other medical professional. The supporting documentation should include a description of the duration and severity of the illness.
- Death of an immediate family member  
Please check this box if a member of your immediate family member (e.g. spouse, parent, or child) died during the semester. In order to appeal for this reason, the death must have either caused you to miss a significant number of classes or have significantly impacted the time you were able to devote to your studies. If you check this box, please provide supporting documentation from an individual outside your family: for example, a physician or other medical professional, your advisor or other faculty member, or the dean of students. The supporting documentation should include a description of the impact of the death on your academic progress.
- Other significant life event  
Please check this box if you experienced a significant life event that caused you to miss a significant number of classes or have significantly impacted the time you were able to devote to your studies. Examples of such significant life events could include: birth of a child, recall to military service, or divorce. If you check this box, please provide supporting documentation from an individual outside your family: for example, a physician or other medical professional, your advisor or other faculty member, or the dean of students. The supporting documentation should include a description of the impact of the event on your academic progress.

You will need to provide a typewritten, signed, detailed explanation of how extenuating circumstances beyond your control prevented you from meeting the requirements of your scholarship. In addition, you must explain what has changed or been resolved that will allow you to maintain academic progress.

**Certification Statement:** By signing below, I acknowledge that I have read and understand the information on this form. I certify that all information submitted with this appeal is accurate and true to the best of my knowledge, that all copies are unaltered, and that I have appropriately obtained all supporting documentation.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date