



## Motlow State Community College

### TELS (Hope Scholarship)/Tennessee Promise Scholarship Appeal Form

Complete the following information and return to the Financial Aid office, Room 2016 in the Crouch Center or mail it to the address at the bottom of the last page.

Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

For which semester are you appealing (eg. semester you withdrew or didn't enroll)? \_\_\_\_\_

For which award are you appealing? (check both if appealing for both)

- TELS Award (Hope, Aspire, Merit, or Access)
- TN Promise Scholarship

Indicate the type of appeal:

- Dropping from full-time to part-time or from part time to less than half time
- Completely withdrawing from the term
- Non-continuous enrollment for one or more semesters (skipped a semester)
- Failure to enroll within allotted timeframe after high school graduation or equivalent (sixteen months for TELS or first Fall semester for TN Promise)
- Missed the verification deadline for TN Promise

**Note: If you lost your TELS scholarship due to GPA, you are not eligible to appeal the loss. You may be able to use a regain provision if you bring your TELS GPA back up to the proper requirement at your next bracket of attempted hours (24, 48, 72, or 96). There is no current appeal for the loss of TN Promise due to GPA.**

Indicate the reason for appeal:

- Personal Illness
- Illness or death of immediate family member
- Extreme financial hardship of the student or student's immediate family
- Military service
- Fulfillment of a religious commitment expected of members of the student's faith
- Participation in an internship or co-op program required as part of the student's academic program
- Other extraordinary circumstances beyond the student's control

#### Required Documentation:

**Appeals will not be reviewed without verifiable documentation.**

- Detailed letter explaining the request for an appeal.
- Supporting documentation (see the chart below).

#### Please read and initial the statements below:

\_\_\_\_\_ I verify that all information and documents I have provided are true and accurate.

\_\_\_\_\_ I understand if my appeal request is approved, my Tennessee Promise Scholarship and/or my TELS scholarship will be reinstated beginning the semester I resume my education if all other eligibility

requirements have been met. If this request is denied, and I take a leave of absence, I will lose my Tennessee Promise Scholarship and TELS scholarship for all subsequent semesters.

\_\_\_\_\_ I understand if my appeal request is denied, I have the right to appeal directly to TSAC according to the appeal procedures found on TSAC's website within 45 days of receiving notification of my denial.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Appeal/Leave of Absence	Appropriate Documentation Examples
Major Illness of Student	<ul style="list-style-type: none"> <li>Statement from a medical doctor or other licensed healthcare provider indicating the type of illness or injury, the date of onset, and whether or not the student is still under medical care. This statement must be on appropriate letterhead.</li> </ul>
Major Illness or Death of an Immediate Family Member (Parent, Sibling, Spouse, or Child) with Whom the Student Lives	<ul style="list-style-type: none"> <li>Statement from a medical doctor or other licensed healthcare provider indicating the type of illness or injury, the date of onset, and whether or not the student is still under medical care. This statement must be on appropriate letterhead.</li> <li>Copy of obituary.</li> <li>Copy of an official death certificate.</li> </ul>
Extreme Financial Hardship of Student or Immediate Family with whom the Student Lives or Upon Whom the Student is Dependent	<ul style="list-style-type: none"> <li>A letter explaining, in detail, the nature of the extreme financial hardship and what action the student and/or family is taking to deal with the situation.</li> <li>Documentation of the current family income, outstanding medical expenses not covered by insurance, etc.</li> <li>Copies of court documents that will support the basis for appeal.</li> </ul>
Fulfillment of Religious Commitment of all Students in a Specific Faith	<ul style="list-style-type: none"> <li>A letter indicating the name of the religion, how and when the student became a member of that religion, and the contact information of the local branch with which the student is affiliated.</li> <li>A letter from a cleric or officer of the local branch of the religion stating what type of religious commitment is required of the student, when the commitment must be fulfilled, the time frame for fulfilling that commitment, and who is expected to fulfill that commitment.</li> </ul>
Military Obligations of Student or of Immediate Family Member with Whom the Student Lives or Upon Whom the Student is Dependent	<ul style="list-style-type: none"> <li>Copy of activation letter for student/immediate family member who is activated.</li> </ul>

Motlow State Community College  
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