



Appeal to Exceed Maximum Time Frame

Name *(please print)*

Social Security Number

Student ID number

You are currently not eligible or you have limited eligibility for further financial aid because our records indicate that you will soon attempt, or have already attempted the maximum number of credits allowed: 125% of the credits required, for your program of study. Regulations limit the number of credits you may attempt (register for) and receive financial aid. In addition to credits that transfer from other colleges to your Shoreline program, all credits for which you have registered at Shoreline are counted in the total, including: audits, withdrawals, repeats, and courses for which you received these grades; 0.0 (fail), H (in progress), W (withdrawal), I (incomplete), N (audit), NC (no credit), V (fail), Z (hardship withdrawal).

If you believe that unusual circumstances prevented you from completing your program, even though you have attempted the maximum number of credits, you may submit this appeal for continued eligibility. Appeals are considered for required courses only. You and your academic advisor must complete the Academic Plan on the back of this form. On the Academic Plan you must:

1. Indicate the courses required to finish your program at Shoreline; and
2. Have your academic advisor sign the form

You may attach additional pages if necessary.

*** Note:** You are responsible for making certain that **ALL** of your remaining required courses are included on your petition. You are allowed to file a maximum timeframe petition only **ONE** time. Use your program’s planning guide and consult with your academic advisor to ensure you understand your program’s completion requirements.

- 1. Explain why you have not been able to complete your program within the initial time period and attempted credits.**

- 2. Quarter and year you will finish your program at Shoreline:** _____

- 3. Complete the Academic Plan on the back of this form with your academic advisor’s name and signature.**

To appeal for continued aid eligibility, list below only the classes **required** to complete your program of study. You need your academic advisor's name and signature. Be sure to complete all items below.

Name (*please print*)

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1. Name of your program at Shoreline: _____
2. Number of remaining credits required to complete your program per Advisor: _____
3. Quarter and Year you will complete the program at Shoreline: _____
4. List below all the courses **required** to complete your program at Shoreline

| Summer 201__ Name and Course Number | Credits | Fall 201__ Name and Course Number | Credits |
|-------------------------------------|---------|-------------------------------------|---------|
| | | | |
| | | | |
| | | | |
| | | | |
| <i>Total Credits:</i> | | <i>Total Credits:</i> | |
| Winter 201__ Name and Course Number | Credits | Spring 201__ Name and Course Number | Credits |
| | | | |
| | | | |
| | | | |
| | | | |
| <i>Total Credits:</i> | | <i>Total Credits:</i> | |

Student's Signature

Date

Print Academic Advisor's Name

Academic Advisor's Signature

Date

OFFICE USE ONLY Deferred_____(pending more information) Denied Approved through_____ as below:

Initials_____

Date:_____