

# Scholarship Appeal

Name: \_\_\_\_\_ Cowley ID: 999-\_\_\_\_\_-\_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip

Phone: \_\_\_\_\_ e-mail address: \_\_\_\_\_

Reason for Appeal: \_\_\_ Scholarship suspended \_\_\_ 5<sup>th</sup> semester \_\_\_ Scholarship Transfer

I am appealing for the **fall / spring / summer** (circle one) semester: \_\_\_\_\_(year)

Write an explanation of your situation and why you feel you have extenuating circumstances for appealing. You may be asked to appeal before the committee to present your case or provide documentation that will verify your situation. Submit this form, along with your written explanation/documentation to the Scholarship Office, Cowley College, 125 South 2<sup>nd</sup>, PO Box 1147, Arkansas City, KS 67005.

- If your scholarship is an activity or athletic scholarship, please attach a support letter from your scholarship sponsor. Your appeal will not be considered without one.

You will be notified by mail of the committee's decision at the address listed above and by e-mail at your Cowley College student e-mail address (C-Mail).

I verify that the information provided in this appeal is true and accurate.

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

\_\_\_\_\_  
Date

*For Office Use Only:*

Scholarship Type: \_\_\_\_\_ Semester started: \_\_\_\_\_

Semester GPA: \_\_\_\_\_ Semester Hours(earned/attempted): \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_