TILLAMOOK BAY COMMUNITY COLLEGE

2018-2019 Time Frame Extension Appeal

Please complete this form using blue or black ink

Student Name:_____ _____
Last Name First Name/MI Student ID#

Address: _____ Phone_____
Street Address Apt #

_____
City State Zip

Time Frame Limit Policy:
Federal regulations limit financial aid eligibility to 150% of the number of credits required to complete a degree, certificate or transfer program as published in the TBCC college catalog. All attempted credits must be counted toward this limit regardless of whether financial aid was received. In addition, you must be able to complete your degree with a cumulative GPA of 2.0 or higher.

Student Instructions for Completing the Time frame Extension Appeal:

1. Complete Part A and Part B of this form.
2. Schedule an appointment with your Career Education Advisor for assistance completing your Career Education Plan and part C of this form.
3. Once the completed form is signed by your Career Education Advisor it will be forwarded to the Financial Aid Office with your statement and a copy of your academic plan.

Note: Appeal requests submitted without an Academic Plan will not be reviewed. Please allow 1-2 weeks for processing. You will be notified via your TBCC email the results of your appeal. Academic Plans are generally only approved by the Financial Aid Office for up to one academic year.

PART A: (To be Completed by Student)
How many additional credits are you requesting to complete your degree/major at TBCC? _____

What is your current major? _____

Indicate your degree, certificate or transfer program at TBCC (check one)

☐ Associates of Arts ☐ Certificate of Completion

☐ Associates of Science ☐ Associate of Applied Science

☐ Transfer Program ☐ Associate of General Studies

Intended Transfer College _____

PART B: (To be Completed by Student)
Prepare a written statement explaining the mitigating circumstances that prevented you from completing your degree or certificate program within the required time frame. Attach statement to this completed form.

_____ _____
Student Signature Date

Financial Aid Office
Phone: 503-842-8222 x 1130
Fax: 503-842-8334
tbccfinancialaid@tillamookbaycc.edu

Please complete this form using blue or black ink

PART C: (To be Completed by the Career Education Office)

1. Please review the information submitted by the student for this appeal and complete the information below.

2. Attach a copy of the student's Career Education Plan and return this form to TBCC's Financial Aid Office.

How many credits are required to complete this degree, certificate or transfer program? _____
(please include only courses that are required for the student's degree, certificate , or transfer program at TBCC. If a course is not required but is recommended, please list in comment section.)

Comments

_____

_____

_____

_____

_____

_____

_____

_____

_____

Name and Title of Person Completing This Form

_____ _____
Name (please print) Title

_____ _____
Signature Date