

Northwest University
Office of the Provost & Student Financial Services
PO Box 579
Kirkland, WA 98083-0579

## **Academic & Financial Aid Suspension Appeal**

This appeal is for students who have been suspended academically or from financial aid eligibility. To appeal the suspension, complete this form in its entirety (includes back page), and submit it to the Student Financial Services Office.

Section A: Student Information				
Las	st Name:	First Name:	NU Student ID:	
Section B: Questionnaire				
1.	Please explain why you were unable	e to meet academic standards:		
2.	Explain what has changed and why	you will be successful now:		
3.	What strategies do you have in plac	e to be successful (study practice	es, support systems, fewer credits, etc.):	
4.	Please provide the following information for the last semester you attended NU:			
	Semester GPA:	How many credits have yo	u registered for/are planning to register for next semester?	
	Cumulative GPA:  Credits Attempted:			
	Credits Earned:			

(Continued on back)

5. Is there additional information you feel would help s	support your appeal?
Se	ection C: Signature
certify that the information on this page is true and cor guarantee of academic or financial aid reinstatement but	rrect to the best of my knowledge. I understand that this appeal form is not allows my circumstance to be reviewed.
Student Signature	Date //
Your appeal will be reviewed within two weeks, or befo	ore the start of classes, whichever may come first. If you have questions ent Financial Services Office.
Section D: No	orthwest University Approvals
Student Financial Services Approval Signature	Academic Approval Signature
Approved:	Approved:
Not Approved:	Not Approved:
Conditions:	Conditions:
- Student	t Financial Services Use Only
CUM GPA:	Term Placed on Suspension:
Total Credits Attempted:	Not Approved:
Total Credits Earned:	Approved:
Conditions:	
Reviewed by:	Date: