

# Maximum Timeframe Appeal Form



If you have reached your maximum timeframe and would like to have your financial aid reinstated, complete the information below. You will be notified in writing of a decision within 15 business days after the date your appeal was received.

Name \_\_\_\_\_  
(Print)

Tech ID # \_\_\_\_\_

E-Mail \_\_\_\_\_

Phone \_\_\_\_\_

1. Did you graduate from a St. Cloud Technical and Community College program?
2. When did you graduate?
3. Which program did you graduate from?
4. Are you attempting to complete two majors? If so, please list them below.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_