

2024-2025 Scholarship Appeal Form

A student who failed to meet the minimum requirements of their scholarship and did not have their scholarship renewed may appeal this status if unusual circumstances interfered with his or her ability to meet these standards. The purpose of the **Scholarship Appeal** form is to allow a student to explain the circumstances that interfered with his or her ability to meet the scholarship standards.

Instructions: Please complete all sections of this form and provide any additional documentation requested. Failure to submit appropriate documentation may result in the denial of your appeal.

1. **Student Information**

Student’s Last Name Student’s First Name Student’s ID

Student’s email address Student’s Phone number

1. **Explanation & Documentation**

Provide a typed statement (no longer than one page) explaining the circumstances and reasons for your appeal. Provide any supporting official documentation (court documents, third-party statements, obituary, etc.) that relate to your circumstances.

1. **Certification**

All the information provided with the submission of this appeal is true and complete to the best of my knowledge. If necessary, I agree to provide further proof of the information that I have given. I understand that submission of an appeal does not guarantee approval, and that my appeal may be denied for failure to substantiate my circumstances or for a lack of documentation.

Student Signature Date

Return completed form to: Arizona Christian University

Attn: Enrollment Management Specialist

1 West Firestorm Way

Glendale AZ 85306

Or Fax to (602) 489-5307