NAME	UV ID		PHONE #	‡	
FINANCIAL	AID&	SCH(RSH	IPS
	UTAH VALLEY	UNIVERSITY			

Scholarship Appeal Form

Please explain any extenuating circumstances which caused you to lose eligibility for your scholarship. Be specific and detailed in your explanation.

To support your appeal, you may need to provide supporting documentation. Examples include a physician's statement, a transcript of grades, or other related information. All supporting documentation must be on letterhead and/or physically signed.

Please submit your appeal by the following dates. Documents will be accepted after these dates, however there is no guarantee that your appeal will be approved.

Fall Semester	Spring Semester	Summer Semester	
November 15 th	April 1 st	July 15 th	

YOUR REASON FOR APPEALING:

STUDENT CERTIFICATION:

I certify that all the information provided is true and accurate. I	understand that if documentation is insufficient, not
included, or if this request is not signed, my request will be deni	ied.

Student Signature: Date:

How to upload: Log in to myUVU, go to *Students*, then *Paying For My Education*, *click Financial Aid File Upload* within the *Aid Tools* box, select the current aid year and click *Submit*. Select your documentation by clicking *Choose File*. Once selected, click *Submit File*. Files can only be uploaded one at a time.

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