# 2010-2011 SCHOLARSHIP APPEAL FORM

Student Name _____ Xavier ID _____

E-mail _____ Current Class Level _____

Current Degree _____

**Over the last year, have you used the Learning Assistance Center or any other academic support services offered by Xavier: SSS/Trio, math lab, writing lab, supplemental instruction?** Yes _____ No _____ N/A_____

If yes, indicate which service(s) and how often: _____

**Please explain the circumstances that prohibited you from achieving the required Cumulative Grade Point Average [CGPA] and the specific plans you have to improve your performance**. Use the space below and attach additional sheets as needed. Please also provide any relevant documents supporting your appeal. **Note**: Attending summer school in an effort to increase your CGPA will not mean an automatic reinstatement of your scholarship. However, successful completion of summer classes may support your case for appeal.

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**Return your completed form to**:

Mail: The Scholarship Appeals Committee
Office of Financial Aid, Xavier University, Schott Hall – First Floor
3800 Victory Parkway, Cincinnati, OH 45207
Fax: 513-745-2806
E-mail: Send scan of completed form to: ***xufinaid@xavier.edu***

For more help, call 513-745-3142.

XAVIER UNIVERSITY