



2024-2025 Loss of CA College Promise Grant (CCPG) Appeal Form

IMPORTANT! Once the semester starts and you are enrolled in classes, if this appeal is denied you will be responsible for ALL incurred charges (enrollment and other fees)

- Foster Youth and former foster youth are not subject to loss of the CCPG
This appeal cannot be submitted for a semester that has already ended
If you have not yet done so, you should complete the 2024-2025 FAFSA or CA Dream Act application

Submit this form to the Financial Aid Office, ONLY if you are appealing your Loss of the CA College Promise Grant (CCPG). Incomplete form will be denied.

SELECT ONLY ONE: (DEADLINE TO SUBMIT THE APPEAL FORM TO REGAIN ELIGIBILITY FOR)

- Summer 2024: Friday, August 23, 2024 @ 3 pm
Fall 2024: Wednesday, December 18, 2024 @ 4 pm
Winter 2025: Thursday, February 13, 2025 @ 4 pm
Spring 2025: Wednesday, June 11, 2025 @ 4 pm

Student's Name: \_\_\_\_\_ GCC ID#: \_\_\_\_\_

GCC Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

CCPG Appeal - Check at least one (You must submit supporting documentation for each item checked)

- I am a student with a verified disability who requested and did not receive accommodation in a timely manner (attach a written statement)
I am a student with an extenuating circumstance with verified evidence of an accident, illness or other circumstance beyond my control. (attach a written statement and a doctor's note, accident report, or other evidence)
I am a student making significant academic and/or completion improvement for the last semester enrolled with at least a 2.00 GPA and 50% completion rate
I am a student with extenuating economic circumstances (attach a written statement and evidence of economic situation, e.g., loss of employment)
I am a student unable to obtain essential support services, e.g. orientation, tutoring (attach a written statement)
I am a student who has not been enrolled at GCC for two consecutive primary semesters (Fall, Spring OR Spring, Fall term combination) since I became ineligible for my CCPG.
I am a student requesting special consideration due to factors/extenuating circumstances related to MY being a student currently receiving services in one of the following programs: (check only one and attach a written statement)
EOPS, CalWORKs, DSPS, Veterans

I declare under penalty of perjury that all information on this form is true and correct. If this appeal is granted, I understand that I will again be ineligible for the CA College Promise Grant (CCPG) if I fail to make satisfactory academic progress.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FOR FINANCIAL AID OFFICE USE ONLY

APPEAL APPROVED APPEAL DENIED Semester: \_\_\_\_\_

Comment: \_\_\_\_\_

Financial Aid Signature: \_\_\_\_\_ Date: \_\_\_\_\_

UNSIGNED FORMS WILL NOT BE PROCESSED