

## Loss of Enrollment Priority and/or CA College Promise Grant CCPG Appeal Form

Email form to: <a href="mailto:ARDocs@glendale.edu">ARDocs@glendale.edu</a>

| Reco<br>and/   | opeal your loss of Priority<br>o <mark>rds Office - November 4</mark><br>or CCPG has been lost. <i>If j</i><br>s (excluding weekends and  | <mark>4 – Novembe</mark><br>your appeal is | <mark>r 29, 2024.</mark> This f | form must be res    | submitted e | very semester i       | n which priority re | egistration |
|--|---|--|---------------------------------|---------------------|-------------|-----------------------|---------------------|-------------|
| GCC ID: Last Name:   |   |  |                                 |                     |             | First Name:           |                     |             |
| GCC Email:   |   |  |                                 |                     |             | Phone:                |                     |             |
| What is your major (course of study):  |   |  |                                 |                     |             | SEMESTER:             | SPRING 2025         |             |
|  | peal your Loss of Enrollm   |  |                                 |                     |             |                       |                     |             |
| Suppo  | rting documentation for each item checked <u>AND</u> obtain the required signatures.) INCOMPLETE FORMS WILL BE DENIED.  I am a student with verified disability who did not receive accommodation in a timely manner (attach a verification of disability |  |                                 |                     |             |                       |                     |             |
|  | document from DSPS Office)  |  |                                 |                     |             |                       |                     |             |
|  | I am a student with an extenuating circumstance with verified evidence of an accident, illness or other circumstance beyond my control. (attach 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/or 50% completion rate. (meet with a counselor and obtain counselor's signature BELOW).                             |  |                                 |                     |             |                       |                     |             |
|  | * I am a student who has a justifiable reason for completing 100-degree applicable units at GCC (attach either a copy of your Financial Aid Contract OR meet with a counselor and obtain counselor's signature below)                                     |  |                                 |                     |             |                       |                     |             |
| I am a student in his/her FINAL semester at GCC (attach acceptance letter or proof of admission application submission OR petition for graduation or certificate). Enter course(s) required to transfer/graduate BELOW): |   |  |                                 |                     |             |                       |                     |             |
| Cour   | se Name   | Course #                                   | Course Name                     |                     | Course #    | Course Name           |                     | Course #    |
|  |   |  |                                 |                     |             |                       |                     |             |
|  |   |  |                                 |                     |             |                       |                     |             |
|  |   |  |                                 |                     |             |                       |                     |             |
| *Counselor's Printed Name and Signature: Date:   |   |  |                                 |                     |             |                       |                     |             |
| To Ap  | peal your Loss of CCPG  | Only – Check                               | at least one <mark>(You</mark>  | must submit su      | pporting d  | ocumentation          | for each item che   | cked)       |
|  | I am a student with extenuating economic circumstances (attach 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 semesters since I became ineligible for my CCPG.  |  |                                 |                     |             |                       |                     |             |
|  | I am a student requesting special consideration because I am a current student in one of the follow programs (check one of the boxes below)   |  |                                 |                     |             |                       |                     |             |
|  | EOPS  | CalWo                                      | ORKs                            | DSPS                |             | Veterar               | IS                  |             |
| lose en  | re under penalty of perjury<br>rollment priority and the (<br>urred charges (enrollment   | CCPG if I fail to                          | make satisfactory               |                     |             |                       |                     |             |
| Student Signature:   |   |  |                                 |                     |             | Date:                 |                     |             |
|  | -   |  |                                 | OFFICE USE ONLY     |             |                       |                     |             |
|  | □ GRANTED □ DENIED  |  |                                 |                     |             | Semester: SPRING 2025 |                     |             |
|  | 100 Units Probat  | ionCC                                      | P OnlyCCF                       | G and Probation Cor | nments:     |                       |                     |             |
| Director of A&R/Associate Dean of Financial Aid Signatures: Date:  |   |  |                                 |                     |             |                       |                     |             |
| Holds re   | emoved from MyGCC on:   |  |                                 |                     |             |                       |                     |             |

Appeals for the loss of priority enrollment will be approved pursuant to the provisions of Glendale College AR 5055, Education Code Sections 66025.8 and 66025.9, and Title 5 Sections 58106 and 58108.