



Financial Aid
 303 University Avenue, Newark, NJ 07102-1798
 p: 973-877-3200 | f: 973-877-3586
 Room 3220 | www.essex.edu/fa

**MAXIMUM TIME FRAME
 APPEAL FORM**

ACADEMIC YEAR: _____

Please print clearly

<u>Student Last Name</u>	<u>First Name</u>	<u>ECC ID#</u>	<u>Home Phone</u>	<u>Cell Phone</u>

Procedures for completing and submitting a Maximum Time Frame Appeal:

- **You should complete this appeal only if you can complete your degree in the Academic year.**
- Complete this appeal form and attach documentation to support your appeal, if it is applicable.
- Take the completed form and documentation to an Academic Counselor Room 4122 or if you are a recipient of Educational Opportunity Fund grant(s) you should meet with a counselor in the EOF office.
- The counselor will discuss your academic status with you and decide if you are eligible for an Academic Plan.
- If you are eligible for an Academic Plan, the Academic Counselor/Advisor will forward your appeal our office.
- Aid will be awarded pending financial aid approval and the terms and conditions of the Academic Plan.
- **You will be notified of the results via your ECC email account and or the ECC Portal. You must sign on to myportal.essex.edu to view your appeal status. Allow two weeks for your appeal to be reviewed for aid eligibility.**

Note: If you fail to follow the terms and conditions of the appeal, you will no longer be eligible for aid at ECC.

STUDENT MAJOR
INSTRUCTIONS
Please briefly describe why you are filing this appeal:
<ul style="list-style-type: none"> • Please explain why you failed to complete your program of study within the maximum time frame allowed for your major. • Please explain what has changed that will allow you to complete all of your requirements in the Academic Year.

CERTIFICATION STATEMENT

I certify that the information on this form and the documentation I am submitting pertinent to this filing is true and correct to the best of my ability.

Student Signature (Full, no initials)	Date

OFFICE USE ONLY

MAXIMUM TIME FRAME APPEAL WORKSHEET

Academic Year: _____

Summer II Fall Spring Summer I

LAST NAME: _____ FIRST NAME: _____ ECC #: _____

Major: _____ Cumulative GPA: _____ Academic Standing Status: _____

Number of Credits Needed for Degree: _____ Maximum College Credits Allowed: _____

Number of College Credits Attempted: _____

Number of Credits Remaining to Obtain a Degree: _____ Number of College Credits Attempted: _____

Eligible for a Maximum Time Frame Appeal: YES NO

CONDITIONS OF APPEAL

- Number of credits approved to earn a degree/certificate _____
- Other: _____

List courses required to complete major requirements:

1.	5.
2.	6.
3.	7.
4.	8.

Counselor's Signature: _____ **Date:** _____