



3. Explain in detail your educational plans and why you need additional time to complete your requirements. If you are pursuing a second degree or certificate, discuss why you decided to earn a second degree or certificate and why it is necessary.

---



---



---



---



---



---



---



---



---



---

4. List the term and year you expect to graduate from LCCC:

Term \_\_\_\_\_ Year \_\_\_\_\_

5. List all classes you need to complete in order to graduate

Term \_\_\_\_\_ Year \_\_\_\_\_

Term \_\_\_\_\_ Year \_\_\_\_\_

Course Name	Course #	Credits

Course Name	Course #	Credits

Term \_\_\_\_\_ Year \_\_\_\_\_

Term \_\_\_\_\_ Year \_\_\_\_\_

Course Name	Course #	Credits

Course Name	Course #	Credits

6. I understand that if my appeal is approved, I agree to follow the schedule as written as part of the appeal conditions in order to remain eligible for federal financial aid.

7. If any of the following occur, I understand it will result in the termination of federal financial aid for future terms and I'll not be able to appeal:

- Withdrawal from one or all courses during a term.
- Fail any courses
- Fail to return the following term (if applicable) according to the written schedule

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date