

Cal Grant Appeals Form

If you received a letter stating you were **disqualified** for a Cal Grant and you feel this was in error, you may be able to submit an appeal, depending on the reason. Using this appeals form, please mark the appropriate boxes below identifying both the action you are requesting and the reason for your appeal. Also, provide a detailed, written explanation along with any supporting documentation you may have. Be sure to submit photocopies (please do not send originals) of all supporting documentation. Mail your completed Cal Grant Appeals Form to the **California Student Aid Commission, P.O. Box 419027, Rancho Cordova, CA 95741-9027.**

- **Incorrect Information:** If you believe you were denied due to an error or incorrect information, please use the **Application Correction Form (G-23)** to correct the error and return it to CSAC. This form is available on-line at: <http://www.csac.ca.gov/doc.asp?id=80>
- **Financial Information or Dependency Status:** CSAC will not take action **on changes to financial information or decisions regarding your dependency status.** If you feel the financial information reported on your Free Application for Federal Student Aid (FAFSA) or Dream Act Application, or your dependency status should be re-evaluated, contact your school's financial aid office. CSAC will only accept financial corrections or changes to dependency status directly from your school.
- **Federal or School-Based Financial Aid:** CSAC does not review or revise any federal or school-based financial aid. Contact your school's financial aid office for questions regarding other financial aid. Questions regarding your student loan(s) should be directed to your school or lender, whichever is applicable.
- **Competitive Cal Grant Awards:** If you received a Competitive Cal Grant disqualification notice and you are not a current high school senior or recent graduate, you will need to reapply next year. Due to the limited amount of awards, CSAC does not accept appeals from new Competitive applicants who were denied an award **unless CSAC has made an administrative error and you have supporting documentation.**

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|---|----------|---|
| Your Name jeffery morse | | CSAC ID 563-04-7564 |
| Address 1840 hammonton smartsville rd #b | | Date of Birth 10-30-1964 |
| City marysville | | Telephone Number 530-315-4839 |
| State ca | Zip Code | E-mail Address jcmorse563@jefferymorseministries.com |

REQUESTED ACTION AND REASON FOR YOUR APPEAL

Please check the requested action to be taken:

- ☐ Additional Leave of Absence
☐ Award Reconsideration
☒ Reinstatement Request
☐ Other _____

Please check the reason for your appeal:

- ☐ Medical
☐ Natural disaster
☐ Death in the family
☒ Reinstatement
☐ Dream Act Application
☐ Other _____

Please provide a detailed explanation addressing your appeal reason (attach additional sheets if necessary):

I was awarded calgrant for school year 2015/2016 at Brandman university CBE program. After receiving my first payment Brandman was disqualified to grant financial aid. During the 2016/2017 school year while Brandman worked closely with the government and Aid Commission to be qualified for financial aid disbursement. During this time students continued attending via Brandman scholarships. As a student my education went uninterrupted during this time except for not getting any financial aid, I went to work to cover other expenses while in school. Now for the 2017/18 school year we are back on track with financial aid as the college was diligent in working out any issues, however, my Calgrant was now not listed in my award letter. After calling the aid commission I was advised to file this appeal. It is my understanding that this would have continued to be open except for the fact of the hold up with the school, further, I was never advised to re-apply. Please re open my Calgrant to continue from my last approved award, I had expected it to be there as the problem was with the school not the student. thanks.

With my signature, I certify under penalty of perjury, that the information I have provided for this appeal is true and accurate.

Signed:

Date:

OFFICE USE ONLY

 Processed Date: ____/____/____ ☐ Approved ☐ Not Approved

Notes from Analyst to Processor