



NEVADA PROMISE SCHOLARSHIP APPEAL

RETURN TO ANY CSN'S FINANCIAL AID OFFICE WITH REQUIRED DOCUMENTATION

This form is used by the College of Southern Nevada (CSN) to review for eligibility for the Nevada Promise Scholarship. CSN cannot waive or change the statutory requirements set by the Nevada Legislature however, if you believe you met the requirements or have extenuating circumstances, please complete this form with additional required documentation (requirements outlined for each appeal reason below) for further review.

A. STUDENT INFORMATION

Form fields for student information: NSHE ID, Last Name, First Name, MI, Promise ID, HS ID #, Email Address, Phone #

B. CHECK THE REASON YOU ARE REQUESTING ADDITIONAL REVIEW FOR NEVADA PROMISE ELIGIBILITY

- Checkboxes for reasons: completed mandatory online training, completed community service hours, completed mandatory mentor meeting, extenuating circumstance (with numbered sub-points 1 and 2).

STUDENTS WITH DISABILITIES

- Checkbox for statement: I UNDERSTAND THAT THIS MUST BE REQUESTED EACH SEMESTER I have a documented disability with CSN's Disability Resource Center and I am not enrolling in 12 or more credits...

Disability Resource Center: by signing below, I am acknowledging the student has provided appropriate documentation to meet eligibility requirements for Disability Resource Center services in the term/year listed below.

Form fields for student information: DRC Printed Name/Title, DRC Signature, Term, Year

C. CERTIFICATION AND STATEMENT OF UNDERSTANDING:

I certify that the information contained within this appeal, including all attachments and enclosures, is accurate and truthful. I understand this information may be shared with members of the CSN Appeals Committee, and as part of my permanent student file, may be reviewed by federal/state employees, their agents, or others contracted by CSN to evaluate the administration of the Nevada Promise Program at CSN. I further understand the Office of Financial Aid will NOT hold my classes pending a decision by the appeal committee. I further understand that it is my responsibility to pay for my courses if a decision is still pending.

Form fields for student information: Student Signature (Required), Date