



BELMONT
COLLEGE

Trustees Scholarship Appeal

This appeal is used when a Trustees Student has not met renewal requirements.
Your Free Application for Federal Student Aid (FAFSA) must be completed before this request will be reviewed.

To Be Completed by the Student:

Student Name: _____ Student ID# _____

Email Address: _____@BelmontCollege.edu

Telephone (____) _____ Semester/Year Requested _____

Is this your first appeal request? (circle response): YES NO

Reason for Request: (Please explain why your GPA is below 2.5 and how you plan to increase it next term):

Signature

Date

Financial Aid Office Use Only:

_____ Approved _____ Disapproved Is this the first appeal? _____

_____ Date Decision Letter mailed to Student

Comments: _____

Completed by: _____ Signature: _____ Date _____