

MULTIPLE WITHDRAWALS/UNSUCCESSFUL TERMS OR SEMESTER AND OVERAWARDS/MEDICAL WITHDRAWAL

# USE THIS FORM IF YOUR APPEAL REQUEST IS RELATED TO CLASSES THAT BEGAN PRIOR TO **AUGUST 1, 2017**

You will need to refer to the 2016/2017 Policy Manual

### **The Appeal Process**

You can ask for an appeal of your assessment of financial need if circumstances set you apart from other

All appeal requests are reviewed by StudentAid BC staff, who will consider the information you provide and review your supporting documentation.

You must show that your circumstances differ significantly from other students.

### The first steps

- 1. If you are attending a B.C. private school or a school outside B.C., contact StudentAid BC for help. If you are attending a public university, college or institute in B.C., we encourage you to discuss your situation with a financial aid officer at your school, as they can help with the appeal process.
- 2. Read the detailed information provided on the appeal forms.
- 3. Include a letter outlining your request, social insurance number, name and address, and attach all required documentation. Mail, fax, or email this information to StudentAid BC.

### Your appeal request must include the following:

- A clear explanation of what you are appealing.
- What your situation is and why you are requesting an appeal.
- What makes your circumstances exceptional when compared with other students.
- How your circumstances prevent you from successfully completing your studies.
- What other funding options you have explored, such as part-time work, bursaries, scholarships, personal lines of credit.
- Documentation that supports your appeal.

In some cases, the appeal request will be referred to an independent appeal committee. The appeal committee includes members of the public, students, and financial aid officers from colleges, institutes and universities. Appeal committee recommendations are final. The committee will not consider submissions on policies that are not eligible for appeal.

Note: If your resources – such as student or spousal prestudy income, study period income or assets – have changed, please submit an Appendix 7: Request for Reassessment.

### StudentAid BC contact information

**Mailing Address:** PO Box 9173 Stn Prov Govt

Victoria BC V8W 9H7

**Email Address:** SABC.AppealsUnit@gov.bc.ca **Courier Address:** c/o StudentAid BC 1<sup>st</sup> Floor

835 Humboldt Street Victoria BC V8V 4W8 If you are calling from anywhere in Canada/U.S.

toll-free 1-800-561-1818

Fax number 250 356-9455 If you are calling from outside North America

250 387-6100

Toll-free fax number 1-866-312-3322



# **Deadlines and Policies not eligible for appeal**

Some policies and criteria are not eligible for appeal.

## These include but are not limited to the following:

- Grants and/or loan funding for previous program years.
- Deadline for appeal, except where severe medical circumstances prevent submission by the deadline.
- Grant/loan overawards that result from an audit.
- Requests to issue student financial assistance more than five months after your study period ends.
- Standard allowances.
- Weekly maximums.
- 10-year maximum (520 weeks).
- B.C. Completion Grant.
- If the student is rehabilitated for student loans after a multiple withdrawal/unsuccessful appeal request and again withdrawals or is unsuccessful.
- Assets including stocks, shares, CSBs, RRSPs, RESPs, mutual funds, etc., unless legal reasons prevented you
  from selling these assets.
- Policies that are not eligible for appeal are also not eligible for consideration by the independent appeal committee.

### **Deadlines**

Appeals submitted after the deadline will not be considered unless severe medical circumstances have prevented you from submitting the appeal, and all required documentation, on time.

- The deadline to request an appeal of an overaward, other than an overaward resulting from an audit, is 90 days from the date of the original letter mailed to you, advising you of the overaward amounts.
- The deadline to submit an appeal request for a debt management decision is six months from the date of the original letter notifying you of the outcome of your B.C. debt management assessment.
- The deadline to submit an appeal request for all other situations is six weeks before your study period ends.

StudentAid BC cannot guarantee a final decision before your study period ends if either of the following is true:

- Further documentation is required and not submitted by the appropriate deadline.
- Your request is forwarded to the independent appeals committee less than six weeks before your study period ends.



### MULTIPLE WITHDRAWALS/UNSUCCESSFUL TERMS OR SEMESTER AND OVERAWARDS/MEDICAL WITHDRAWAL

Any combination of two or more withdrawals and/or 68 weeks of unsuccessful semesters while receiving StudentAid BC funding will result in further assistance being denied.

If you withdraw from full-time studies on two separate occasions, or are unsuccessful for 68 weeks while receiving StudentAid BC funding, or during an interest-free period you must successfully complete two consecutive semesters, or one academic year of study, without StudentAid BC funds. This must be accomplished after the last semester in which StudentAid BC funding was received, for you to be considered for StudentAid BC eligibility.

Complete this appeal if extenuating circumstances prevented you from completing two consecutive semesters or one academic year of study without StudentAid BC funding.

You may wish to consider part-time loan funding if your request for full-time StudentAid BC funding is not approved. Visit: www.StudentAidBC.ca for a detailed description of the part-time loan program.

If you have overawards due to your withdrawal(s) you may wish to appeal. See the Overawards/Medical Withdrawal form on Page 5.

SECTION 1 – PERSONAL INFORMATION	
ALL QUESTIONS MUST BE ANSWERED IN INK.	
(01) SOCIAL INSURANCE NUMBER	MINISTRY DATE STAMP
(02) Student's LAST NAME	
(03) Student's FIRST NAME	MIDDLE INITIAL
(04) APPLICATION NUMBER	If you have a change of address, please visit <a href="https://www.StudentAid">www.StudentAid</a> BC.ca.

### **SECTION 2 – DECLARATION**

I authorize an appeal of my assessment due to exceptional circumstances. I understand that:

- 1) All terms agreed to on my application will remain in force.
- StudentAid BC may consider information from prior applications in my appeal request.

SIGNATURE OF STUDENT	PRINT NAME	DATE SIGNED
		YEAR MONTH DAY
SIGN HERE	PRINT HERE	

# CHECKLIST Include the following documentation: A letter explaining: The reason(s) for each withdrawal and/or unsuccessful semester(s) (along with supporting documentation). Your inability to finance two consecutive semesters or one academic year without StudentAid BC funding. The reason you should be issued further StudentAid BC funding. Your expected completion date, and your future education and employment plans. Copies of your post-secondary transcripts (faxed copies are not acceptable). A letter from your faculty/department head confirming your ability to complete your program of study in the time frame specified.

### Notes:

- Students who appealed for further funding or were reinstated through StudentAid BC after two withdrawals or 68 weeks of unsuccessful study and subsequently withdrew or did not successfully complete the extended funded term are not eligible for further StudentAid BC funding, including reinstatement and/or eligibility for interest-free status. This decision is not subject to an appeal.

Documentation from a qualified medical practitioner stating that you are now in good health and able to maintain at least 60 per

cent of a full course load (40 per cent for students with permanent disabilities).

If your multiple withdrawal/unsuccessful completion appeal for StudentAid BC funding is successful, or if you have reinstated your eligibility by completing once academic year or two semesters without StudentAid BC funding and again withdraw or have an unsuccessful semester, you will be ineligible for further StudentAid BC funding and interest-free status. This is not subject to appeal, unless extenuating medical or compassionate reasons impacted your ability to attend or successfully complete your full-time studies.

Allow 4-6 weeks for processing.

PLEASE STAPLE ANY REQUIRED DOCUMENTATION TO THIS FORM



# **OVERAWARDS/MEDICAL WITHDRAWAL**

An overaward means you received more StudentAid BC funding than you are eligible to receive. Overawards can occur for a variety of reasons: **Note:** 

Approval of your overaward appeal does not change your obligation to repay the overawarded funds, nor does it revise your term end date. All overawards are due and payable on or before the first day of the seventh month after ceasing full-time studies. In addition, the semester will be counted as unsuccessful for the purpose of scholastic progression; however, approval of your overaward appeal may reinstate your eligibility for further funding. If you are returning to full-time studies within six months of your withdrawal date, you must complete and submit a Certificate 3 to StudentAid BC to postpone repayment of your grant overaward.

Overaward appeals will not be considered if:

- 1. The 90 day deadline to appeal has passed (unless severe medical circumstances prevented you from submitting your appeal on time).
- 2. StudentAid BC funding was received after you withdrew from full-time studies.
- 3. The overaward resulted from an audit. Additional information regarding your audit may be submitted for review by StudentAid BC's audit and verification unit.

SECTION 1 – PERSONAL INFORMATION ALL QUESTIONS MUST BE ANSWERED IN INK.		
(01) SOCIAL INSURANCE NUMBER	MINISTRY DATE STAMP	
(02) Student's LAST NAME		
(03) Student's FIRST NAME	MIDDLE INITIAL	
(04) APPLICATION NUMBER	If you have a change of address, please visit www.StudentAidBC.ca.	

### INSTRUCTIONS TO THE STUDENT FOR THE MEDICAL WITHDRAWAL FORM

- 1. If you are asking that your StudentAid BC overawards be set aside due to a medical withdrawal, Section 3 of this form is to be completed by your doctor/counsellor.
- 2. Complete sections 1 and 2 and forward this form to your doctor/counsellor to complete Section 3. Your doctor/counsellor will return the form to you. Mail the completed form to: StudentAid BC, PO Box 9173 Stn Prov Govt, Victoria BC V8W 9H7.
- 3. Any fees charged by your doctor/counsellor to complete this form are your responsibility and will not be reimbursed by StudentAid BC.

### **SECTION 2 – DECLARATION**

I authorize an appeal of my assessment due to exceptional circumstances. I understand that:

- 1) All terms agreed to on my application will remain in force.
- 2) StudentAid BC may consider information from prior applications in my appeal request.

I certify that information provided with this request is accurate and correct.

I consent to the release of information from my doctor or counsellor to the Ministry of Advanced Education, StudentAid BC.

I understand that this information will be used to determine whether StudentAid BC policy will be set aside due to my medical condition.

SIGNATURE OF STUDENT	PRINT NAIVIE	DATE SIGNED
		YEAR MONTH DAY
SIGN HERE	PRINT HERE	

# SECTION 3 – MEDICAL WITHDRAWAL FORM (TO BE COMPLETED BY THE DOCTOR/COUNSELLOR)

### INSTRUCTIONS TO THE DOCTOR/COUNSELLOR

- 1. Complete Section 3 and return it to the patient. This form will not be processed without a doctor's/counsellor's stamp.
- 2. Any fees charged for the completion of this form are the responsibility of the patient and will not be reimbursed by StudentAid BC.

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Note: If you have an ongoing medical condition that existed before your study period started, your medical documentation must also specify what happened during the study period that made it necessary for you to withdrawal.