

DEADLINE

Six weeks before your study period ends.

WHAT IS AN APPEAL?

An appeal is the process by which you have the opportunity to request a reconsideration of your assessed award. If you have had an exceptional circumstance that meets one or more of the criteria listed below and you have not received the maximum amount of funding for the application study period, you may submit an appeal request. Once evaluated, the appeal request may result in a change to your StudentAid BC award.

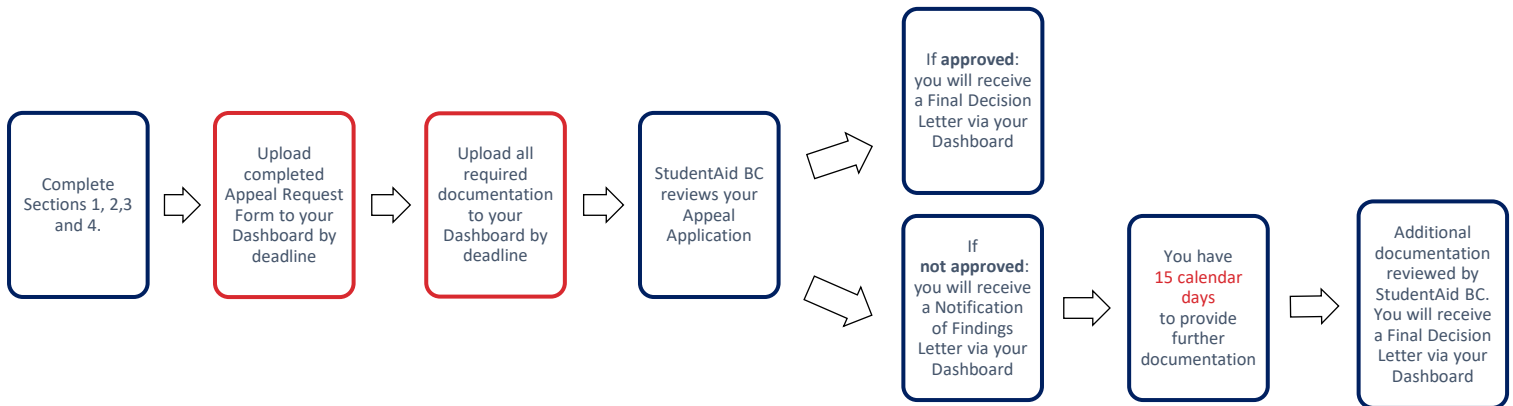
APPEAL CRITERIA

You can submit an appeal request for additional transportation allowance if one or more of the following criteria applies:

- There is no/limited local public transit where you live
- The travel is required due to special circumstances (e.g. work schedule, family transportation responsibilities or a requirement to live a significant distance from your post-secondary institution)
- Additional transportation for a clinical or practicum placement is required

APPEAL INSTRUCTIONS

1. Talk to a Financial Aid Officer at your school, they can help you with the appeal process. If you are unable to contact a Financial Aid Officer, contact [StudentAid BC](#).
2. Review the Appeal Criteria.
3. Complete Sections 1, 2, 3 and 4.
4. Upload your completed Appeal Request Form and all required documentation to your StudentAid BC [Dashboard](#).



Appeal Request Form starts on page 2.

SECTION 1 – STUDENT INFORMATION

STUDENT'S SOCIAL INSURANCE NUMBER

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STUDENT'S APPLICATION NUMBER

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STUDENT'S LAST NAME

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STUDENT'S FIRST NAME

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MIDDLE INITIAL

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SECTION 2 – REQUIRED DOCUMENTATION

You must submit all of the following documentation to your StudentAid BC [Dashboard](#) to support your appeal request:

- A letter** describing the circumstance(s) that meets one or more of the Appeal Criteria (see page 1) and why you cannot move closer to your school.
- All relevant supporting documentation** (work schedule, clinical or practicum information, etc.).
- A copy of the vehicle insurance.**

YOUR ASSESSMENT WILL BE DELAYED OR DENIED IF YOU DO NOT SUBMIT ALL REQUIRED DOCUMENTATION.

SECTION 3 – TRAVEL INFORMATION

1. Could you move closer to your school for the same or less living costs? **YES** **NO**

If YES: You do not qualify for this allowance. Do not complete this form.

If NO: Continue to question 2. Please explain why you cannot move closer to your school in your letter (see required documentation).

2. Provide cost information for your monthly housing and motor vehicle costs:

RENT	\$	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							.00	GAS	\$	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							.00
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VEHICLE PAYMENT	\$	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							.00	VEHICLE UPKEEP	\$	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							.00

3. Is public transit to your school available in your neighbourhood? **YES** **NO**

If YES: Does public transit take more than two hours from your neighbourhood to your school and back by the quickest/most direct route?

YES **NO**

4. During your study period, what is the average number of kilometers you will travel each week from your place of residence to your school and back? _____ **Kilometers**

5. If you must also travel by car to take your child(ren) to and from daycare, please provide:

The number of trips each week: _____

Distance travelled: _____ **Kilometers**

6. Are you the owner/lessee of the motor vehicle? **YES** **NO**

Your insurance must support your usage of the vehicle. You must upload a copy of your insurance to your StudentAid BC [Dashboard](#).

7. Your driver's license number:

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8. Province or Territory: _____

9. Are you the primary operator, but not the registered owner, of the vehicle? **YES** **NO**

You must upload a copy of your insurance to your StudentAid BC [Dashboard](#).

10. If you are requesting the use of a vehicle only when you are in a practicum placement during your study period, please state the number of weeks in in your practicum: _____ **weeks**

11. Are you the only person using this vehicle to travel to and from a post-secondary institution? **YES** **NO**

SECTION 4 – DECLARATION

By submitting this request for an appeal, I understand that:

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

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

X	CHECK MARK	PRINT STUDENT'S FIRST AND LAST NAME	MM/DD/YYYY
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Collection and use of information: The information included in this form and authorized above is collected under Sections 26(c) and 26(e) of the *Freedom of Information and Protection of Privacy Act*, and under the authority of the *Canada Student Financial Assistance Act*, R.S.C. 1994, Chapter C-28 and StudentAid BC. The information provided will be used to determine eligibility for a benefit through StudentAid BC and for statistical and evaluation purposes. If you have any questions about the collection and use of this information, contact the Director, StudentAid BC, Ministry of Advanced Education and Skills Training, PO Box 9173, Stn Prov Govt, Victoria B.C., V8W 9H7, telephone 1-800-561-1818 (toll-free in Canada/U.S.) or +1-778-309-4621 from outside North America.

Upload completed Appeal Request Form and all required documentation to your StudentAid BC Dashboard at studentaidbc.ca/dashboard.