INSTRUCTIONS FOR COMPLETING THE FINANCIAL AID MAXIMUM CREDIT APPEAL

Your financial aid eligibility is limited to a maximum number of credits attempted based on your current degree or certificate. Your financial aid eligibility is denied because you have now reached or exceeded the maximum number of credits allowed. The attached form is to be completed if you wish to request your circumstances be considered to reinstate your financial aid.

DEADLINE TO SUBIMIT APPEAL

Appeals must be complete and submitted by the Friday of the Midterm week for full-semester courses. If
enrolled in the Summer semester or Block courses, appeals are due Friday of the midpoint of the course(s) or
semester enrolled. Incomplete appeals will not be reviewed.

BEFORE SUBMITTING YOUR APPEAL

- **Complete your FAFSA**: Complete a Free Application for Federal Student Aid (FAFSA) for the semester you are requesting reinstatement of financial aid. https://studentaid.gov/.
- You must be an admitted, degree-seeking student at the College of Eastern Idaho.
- You must be registered for the semester you are requesting reinstatement of financial aid.

SUBMITTING YOUR APPEAL

- Complete all sections of the appeal form.
- **Provide an Explanation**: Complete Section 2; provide an explanation or attach a signed detailed letter of explanation (preferably typed). Provide documentation to support your appeal if applicable.
- Complete the Degree Plan: Meet with an Academic Advisor or Faculty Mentor (formerly Faculty Advisor) to complete the Degree Plan for all remaining semesters to complete your degree or certificate objective. The Degree Plan must be signed and approved by your advisor. You may schedule an appointment to meet with an Academic Advisor: please call 208-524-3000 Ext.2.
- **Register for classes:** You must be registered for the advisor-approved courses listed on the Degree Plan for the semester you are requesting financial aid reinstatement.
- **Submit Appeal**: Return your completed appeal form, statement and documentation to: Financial Aid Office, College of Eastern Idaho, 1600 S. 25th E., Idaho Falls, ID 83404 Fax: (208)525-7026, Email: financial.aid@cei.edu.

AFTER YOU SUBMIT YOUR APPEAL

- Committee Review: A committee reviews your appeal, notification of the decision will be sent to your CEI email.
- Appeal Approval: If your appeal is approved, your financial aid eligibility will be reinstated for the semester you are appealing. The committee may restrict your schedule, make recommendations or requirements. You cannot change your approved schedule after the last day to add or drop classes. If your appeal is approved, we will continue processing your financial aid. Appeals submitted and approved after the Priority Deadline may have to wait until after Attendance Verification is complete before aid will be disbursed. Financial aid funds will be available to you based on the disbursement schedule of the College of Eastern Idaho.
- Appeal Denial: If your appeal is denied in review, you have the option to schedule an appointment with the
 Appeal Committee, for an opportunity to explain your appeal further and to submit any additional
 documentation. The decision of the Appeal Committee is final.
- Withdrawing: Withdrawing from any or all courses will result in future denial of aid eligibility.
- Responsibility: You are responsible for meeting all the Satisfactory Academic Progress Policy (SAP)
 requirements. You will be denied future financial aid if you do not meet all SAP requirements at the conclusion
 of the semester.
- SAP Policy: https://cei.edu/financial-aid/sap



MAXIMUM CREDIT APPEAL 2024-2025

Financial Aid Office Phone: (208) 524-3000 ext. 7 Toll Free: 1-800-662-0261 Fax: (208) 525-7026

financial.aid@cei.edu

1600 S. 25th E. Idaho Falls, Idaho 83404

First Name	Last Name	Student ID	Last 4 SSN	Phone Number
			xxx-xx	

You have been denied financial aid because you have not met the financial aid Satisfactory Academic Progress requirements. To evaluate if your federal financial aid can be reinstated, the Financial Aid Office must verify the amount of credits, course requirements and cumulative GPA you need to be compliant for the stated degree or certificate.

Policy: Students must be able to complete their declared degree or certificate program within 150% of the published number of credit hours required to complete the program. For example: if the published length of an Associate of Applied Science degree is 64 credit hours, students must be able to complete their program within 96 attempted credit hours.

The maximum credit calculation is performed as follows:

All CEI credit hours attempted in a declared degree/certificate program (including repeated credits) plus all transfer credit hours accepted by CEI, as both attempted and completed credits, count towards the maximum credit calculation. The total number of credits will determine progress toward the declared degree or certificate. Students may change their declared degree or certificate program; however, all attempted credits required towards the new declared degree or certificate will count towards the maximum credit calculation.

Section 1: Provide the following information, Print to Sign:							
What semester are you requesting financial aid reinstatement? (Mark Only One):							
Fall Semester 2024	Spring Semester 20	025 Summer	Summer Semester 2025				
Student Certification: I certify that all statements in this a to provide additional documentatio and/or require immediate repayme attached or sufficient, or this appea If my appeal is approved, I agree to I registered for with a 2.0 semester cannot change the approved Degree Academic Advisor. I understand the certificate.	n if needed. I understand that put of financial aid. I agree to the I is not signed, it will be returned complete and pass all courses GPA, in accordance with Finance Plan or approved class schedu	providing false information could appeal process and understanded as incomplete. Soutlined on my advisor-approvencial Aid Satisfactory Academic Pule without the approval from the	result in denial, reduction, that if documentation is not ed degree plan, for the semester rogress Policy. I understand I CEI Financial Aid Office and my				
I understand withdrawing from cou suspension of future financial aid el approved appeal but still do not me have my progress evaluated. Print to sign. Electronic signature w	igibility. I understand if, at the o et the overall Satisfactory Acad	conclusion of the semester, I have	e met the terms of my current				
Student Signature WARNING: If you purpo	osely provide false or misleading infor	Date mation, you may be subject to a fine, imp	prisonment, or both.				
Financial Aid Office Use only	Received By:	Date Received:	Documentation Received				

Section 2: Statement of explanation. Provide a statement including the following:
 Why you have exceeded the maximum number of credits for your degree or certificate? What has changed that will allow you to complete your degree/certificate within the time frame indicated on this
appeal?How many semesters will you need to complete your degree and receive Financial Aid?



MAXIMUM CREDIT APPEAL Degree Plan 2024-2025

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1600 S. 25th E. Idaho Falls, Idaho 83404

Date:

First Nam	ne	Last Name	Student ID	Last 4 SSN	Phone Number
				ххх-хх-	
below. Io course u advisor; What is your cur	th an Acad dentify on Intil you w please cal	demic Advisor or Faculty Mentally the course(s) required for your of graduate or complete your of 208-524-3000 Ext.2. The ending of the course of the cours	your degree and the certificate. You may Business A.A.)	semester during w schedule an appoi	which you will take each ntment to meet with an
Semester	Year	Course Number		Course Title	Credits
Attach additional pa Academic Advi		culty Mentor Instructions:			
After this	plan is cor	nplete, please review and sign it v			
required	for the stud	dent to graduate. Please print and	d attach a copy of the A	Academic Evaluation	(EVAL): 🔲
have met with	this stude	ent and verify the classes listed	l above are needed	to graduate in the	identified objective.
Advisor Name (p	orint):			Phone:	
Advisor Signatur	e:			Date:	

Please return this completed form to the CEI Financial Aid Office.

Office Use Only

Registrar Signature of Approval: