GNTC ID

Last Name

First Name

Financial Aid Office Phone: 1-866-983-4682

M.I.

2023-2024 Financial Aid

GEORGIA IORTHWESTERN ECHNICAL COLLEGE		Max-Timeframe Appeal			E-mail: <u>Financial Aid</u> Fax: (706) 802-5041
Ferm you are applying for reinstatement of aid: Fall Spring Summer Summer					ummer 🔲
n order for you to be eligible to appeal the denial of aid due to meeting or exceeding the Maximum Timeframe allotted for your current program, complete the following and have an academic advisor sign off on the classes needed to graduate, or be evaluated for a change of program: 1. What is the major code of the program you are currently enrolled in? 2. If you are changing programs, what is the major code you will be enrolling in? 3. If you are not changing programs, have your Academic Advisor provide a list of classes needed to graduate. This list needs to be completed in its entirety, or the form will be sent back to you if there is any missing information.					
	CRN	Subject	Course Number	Credit Hour	-S
Advisor Printed Name:					
Advisor Signature: Date:					
Your student email is the official form of communication for Georgia Northwestern Technical College. We will send you notification of the Committee's decision to your student email account. It is your responsibility to check your email account frequently for any information the Office of Financial Aid may send you.					
*Please allow a minimum of 2 weeks for the appeals to be reviewed.					
My signature below certifies that I understand the financial aid appeal process and what is required by me:					
Student's Signature					Date
For FAA Committee Use Only:					
Determination Comments:	on: 	150% Appeal Ap	proved	Denied	

Committee initials: (1) ______ Date: ___