2017/18 Request for Review/Reconsideration: Academic Progress Summary

Please indicate application type:  OSAP Full time  OR  OSAP – Part time  

I am forwarding this appeal to complete my application for:  Fall/Winter  Spring/Summer  

I am currently on  Academic Warning (Probation)  Academic Restriction  Academic Edit  

I submitted a Request for Review/Reconsideration (with supporting documents) in 16/17 15/16  

I have previously attended another college or university  No  Yes (if yes, please attach transcripts)  

Total OSAP loans to date (outstanding loan balance available at www.canlearn.ca): $__________________

Unsatisfactory Academic Progress Information:

If selecting one of the reasons below, which is marked with an asterisk, you must provide an explanation AND attach supporting documentation* (ex. doctor's note, death certificate, counsellor or third party letter)

<table>
<thead>
<tr>
<th>Disability*</th>
<th>Medical Condition*</th>
<th>Death in Family*</th>
<th>Personal Crisis*</th>
<th>Other</th>
</tr>
</thead>
</table>

Explain how your academic progress was affected by the disability/medical condition/death in family/personal crisis OR other reason noted above. Attach additional pages if more space is required.

<table>
<thead>
<tr>
<th>For Office Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>C36</td>
</tr>
<tr>
<td>Supporting documentation on file from previous year?  No  Yes  Academic Year? __________</td>
</tr>
<tr>
<td>Approved  Denied  Reason:  ____________________  Downgraded to C37?  Yes  No</td>
</tr>
<tr>
<td>FAO Signature: ____________________  Date: ______________</td>
</tr>
</tbody>
</table>

7 June 2018
Academic Progress Improvement Information:

Indicate how you intend to improve upon your academic results to date AND confirm your academic and career goals...

List specific steps you have taken/are taking or plan to take to improve your academic progress –

1. ____________________________________________________________________________________

2. ____________________________________________________________________________________

3. ____________________________________________________________________________________

List specific student services/resources you have used/are using/plan to use –

1. ____________________________________________________________________________________

2. ____________________________________________________________________________________

3. ____________________________________________________________________________________

List your current academic goals, as well as your longer term academic and career goals.

1. ____________________________________________________________________________________

2. ____________________________________________________________________________________

3. ____________________________________________________________________________________

ONLY complete this section IF you are CURRENTLY BLOCKED from funding due to a Code 65 Academic Progress Restriction (i.e. if you failed to maintain satisfactory academic progress while you were on OSAP academic probation)

Please explain how you have kept your existing loans in good standing –

____________________________________________________________________________________

____________________________________________________________________________________

Did you successfully complete two terms of full-time study at your own expense? Yes ☐ No ☐

If yes, please explain how your education and living costs have been covered –

____________________________________________________________________________________

____________________________________________________________________________________

Did you take at least one year off from your full-time studies? Yes ☐ No ☐

If yes, please describe your activities during your time away from school –

____________________________________________________________________________________

____________________________________________________________________________________

Student signature ___________________________________________ Date ________________________