



Academic and Institutional Scholarship Exception and Hold Request

Student Name _____ Student ID _____

Email Address _____ Phone Number _____

Home Address _____

Instructions:

- Complete the information below, sign and date.
- Provide a type written request explaining the circumstances and reason for the request
- Attach appropriate documentation substantiating the reason for the request
- Return documentation to the Financial Aid Office (address below)

Please list scholarship for which you are requesting the exception/hold:

Name of your scholarship _____

Please check what you are requesting:

____ Exception to the grade point (GPA) requirement

____ Exception to the hour requirement

____ I would like to place a hold on my scholarship for ____ terms/weeks. Returning _____.

Please check the box which reflects the circumstance that exists:

____ **Medical** - Submit medical records and a letter from a licensed medical professional indicating nature of the condition and timeframe in which the condition has or will impact the ability to complete the academic work.

____ **Military** - Documentation must include copy of military orders

____ **Death in the family** – documentation must include death certificate

____ **Religious/Humanitarian** - Documentation must include a letter of acceptance into the program and a letter from a religious leader or director of humanitarian project on official letterhead.

____ **Other** -Explain with documentation _____

Note: Any and all documents that are submitted to support this appeal will be reviewed by the Scholarship Appeals Committee, including medical records. By signing below, I authorize the release of information to the Appeals Committee and authorized Financial Aid staff.

Student Signature: _____ Date: _____

Williamson College scholarship committee will review and evaluate the request and documentation and make a decision based on institutional policy. The student will be notified in writing when a decision has been made.

Office use:

Action Taken: _____ Date: _____ Signature: _____