

Institutional Scholarship Consecutive Enrollment Appeal Form
President's Leadership and/or Honors Program Scholars

Institutional scholarships are merit-based scholarships awarded through the President's Leadership and Honors Programs. In order to retain scholarship benefit eligibility, students in these programs must adhere to a specific set of criteria throughout their undergraduate academic career to include consecutive, full-time enrollment for a maximum of eight semesters.

In certain situations, a student may be eligible to retain scholarship benefit eligibility through their program while taking a leave of absence from Christopher Newport University. All appeals are reviewed on a case-by-case basis and determinations are made by the Office of Financial Aid.

Students who wish to appeal to retain their scholarship benefit eligibility during a leave of absence must complete this application and attach the relevant supporting documentation as listed below.

STUDENT INFORMATION

Name: _____ Student ID #: _____
Semester of Leave (ex: Fall 2020): _____

REASON FOR APPEAL

Check the box below that applies to the reason for your appeal and attach the relevant supporting documentation listed:

Medical

If taking a medical leave, the following documentation must be submitted with this appeal:

- Letter from a medical health professional confirming the medical circumstances and recommendation for a leave of absence, or
- Medical documentation to verify the circumstances and a signed and dated statement from the student explaining the circumstances and the justification for a semester of leave.

Note: Students referred by a medical professional for a leave of absence must provide a follow-up letter with consent to return.

☐ **Internship**

Students who choose to leave Christopher Newport to participate in a non-Christopher Newport approved internship (ex. Disney College Program) may appeal to retain their scholarship eligibility upon their return; however, will forfeit their scholarship eligibility during their semester of leave and will not be eligible to receive eight semesters of their scholarship.

If taking leave for an internship, the following documentation must be submitted with this appeal:

- Documentation of internship program acceptance to include the location and dates of the internship.

☐ **Other**

If requesting a leave of absence for any other reason, please submit the following:

- Signed and dated statement from the student explaining the circumstances and the justification for a semester of leave, and
- Third party documentation verifying the extenuating circumstances presented.

This form must be submitted 10 days prior to start of the appeal semester to the Office of Financial Aid via email, fax, or in person. The Office of Financial Aid is located on the ground floor of Christopher Newport Hall.

By signing this appeal, I certify that all information reported is complete and correct. During my leave of absence, I agree not to enroll in any other institution of higher education. I understand that if approved, this appeal is only applicable for the appeal semester indicated above and that I forfeit my scholarship benefits if I fail to return to Christopher Newport the following semester. I also understand upon returning to Christopher Newport, I must meet all eligibility requirements to retain scholarship benefits moving forward.

Student's Signature: _____ Date: _____

Internal Use Only

Semester of Leave: _____ Fund Code: _____ Amount: _____ Date Processed: _____