



Registration Appeal and/or CCPG Fee Waiver Appeal
This form is to appeal your enrollment priority and/or loss of CCPG fee waiver

Note: Foster Youth and Former Foster Youth (up to age 26) are exempt from loss of both priority registration and CCPG fee waiver per regulation.

Last Name: _____ First Name: _____ Student ID # _____

RCC Email: _____ Phone: () _____ - _____

Minimum documents that must be included with this form as well as those identified below:

A narrative of your situation AND an RCC Comprehensive Student Educational Plan (2+ semesters SEP)

Enrollment Priority Appeal Reasons: (check one)

- Academic/Progress Probation Extenuating Circumstances: verified illness, accident or circumstance beyond the control of the student. (Examples of documentation are doctor's notes, accident report, etc.). **Official documentation must be attached.**
- I have been making significant academic improvement by completing my last semester with a 2.00+ GPA, and completed more than 50% of my semester coursework.
- I am a student with a verified disability who applied before the deadline, but did not receive my requested accommodation.
- Final Term: I am completing my program during the requested term for this appeal

Please note: a student can only file one successful registration appointment appeal during their RCCD career.

Loss of CCPG Fee Waiver: Attach a narrative of your situation on the next page AND check one below

- Academic/Progress Probation Extenuating Circumstances: verified illness, accident or circumstances beyond the control of the student or other circumstances that might include documented changes in the student's economic situation. (Examples of documentation are doctor's notes, accident report, loss of job, etc.) **Official documentation must be attached.**
- I have been making significant academic improvement by completing my last semester with a 2.00+ GPA, and completed more than 50% of my semester coursework.
- I am a student with a verified disability who applied before the deadline, but did not receive my requested accommodation. (Provide verification from the DRC center).
- I was unable to obtain essential support services. (Provide verification from the support services department).
- I would like to be granted special consideration as I am a student in one of these programs (check all that apply). (Written program verification must be attached **AND** you must also meet one of the other appeal situations): ___ CalWORKs ___ DSPS ___ EOPS ___ Veterans
- I have had a change in economic situation. Attach statement explaining change and attach supporting documentation.

I declare under penalty of perjury that all information on this form is true and correct. I understand that this appeal form is void if I should continue to fail to make academic progress.

Student Signature: _____

Date: _____

*****For Office Use Only *****	*****For Office Use Only *****
<p>Loss of Enrollment Priority</p> <p> <input type="checkbox"/> Approved <input type="checkbox"/> Email to Student <input type="checkbox"/> Comments posted <input type="checkbox"/> Pending <input type="checkbox"/> Email to Student <input type="checkbox"/> Comments Posted <input type="checkbox"/> Denied <input type="checkbox"/> Email to Student <input type="checkbox"/> Comment Posted </p> <p>Original Registration Appt Date/Time: _____ Approved Registration Appt Date/Time _____</p> <p>Authorized Signature: _____ Date: _____</p>	<p>Loss of CCPG Fee Waiver</p> <p> <input type="checkbox"/> Approved <input type="checkbox"/> Email to Student <input type="checkbox"/> Pending <input type="checkbox"/> CCPG Awarded <input type="checkbox"/> Denied <input type="checkbox"/> Email to Student <input type="checkbox"/> Email to Student </p> <p>FA Staff: _____ Date: _____</p>



Registration Appeal and/or CCPG Fee Waiver Appeal

This form is to appeal your enrollment priority and/or loss of CCPG fee waiver

Briefly explain what circumstances have led to the loss of your enrollment priority and/or loss of your CCPG Fee Waiver. Official documentation must be attached.

A large, empty rectangular box with a black border, intended for the student to provide a written explanation of their circumstances and attach any official documentation.

Loss of Enrollment Priority and/or CCPG Fee Waiver Appeal Processing Instructions

LOSS OF PRIORITY REGISTRATION:

Per Title 5, Section 58108 Regulations of the California Community College System, your calculated academic standing will impact your assigned registration date for future semesters. A second consecutive term (fall/spring semesters) on academic or progress probation will result in the loss of continuing student priority registration. This will also apply to any student over 100-unit limit (excluding non-degree applicable and ESL courses and high-unit majors that are over 60 units). This means you would register after all continuing and new students thereby possibly losing your opportunity for the courses you need to complete your educational goal.

LOSS OF CALIFORNIA COLLEGE PROMISE GRANT (CCPG):

Please be aware a student that continues on a second consecutive term (fall/spring semesters) on academic or progress probation will result in the loss of the CCPG Fee Waiver.

1. Complete the student information part of this appeal form and a narrative of your situation. (If you are Foster Youth you are exempted from this process. Please contact the Financial Aid department.)
2. Submit the completed Appeal form and all of the supporting documentation that is indicated on the form based on your appeal reason (Appeal Form, typed narrative, comprehensive education plan, and supporting documentation) to studentfinancialservices@rcc.edu. Any missing information will result in your Enrollment Priority/CCPG Fee Waiver Appeal request to be denied. Do not submit from your personal email address

A response will be sent to your RCCD student email address with 3-5 business days informing you of the appeal's outcome. Please check your email daily for this response.

Important Notices and Resources:

- This appeal does not apply to financial aid other than the CCPG. Students appealing for financial aid ineligibility need to complete the financial aid Extenuating Circumstances Petition. Refer to your ineligible email, visit the financial aid counter or call (951) 222-8710 for more information.
- To make an appointment with a counselor for a Student Educational Plan (SEP), call (951) 222-8440 or visit the counseling website at <https://rcc.edu/student-support/counseling.html>
- You can find out more information on Admissions and Records online at www.rcc.edu
- You can find out more information on financial aid at <https://rcc.edu/become-a-student/how-to-pay-for-school/financial-aid.html>

All Appeal forms and documentation must be received via your RCCD student email. Planning ahead is very important!

All applications for financial assistance programs, (i.e., student loans, work compensation, grants, scholarship, special funds, subsidies, prizes, etc.), will be considered by the Riverside Community College District without regard to ethnic group identification, national origin, religion, age, sex or gender, race, color, ancestry, sexual orientation, physical or mental disability, or any characteristic listed or defined in Section 11135 of the Government Code or any characteristic that is contained in the prohibition of hate crimes set forth in subdivision (1) of Section 422.6 of the California Penal Code, or any other status protected by law. Alternate formats for this material are available to individuals requiring disability accommodation. Please contact the office of Diversity, Equity and Compliance at (951) 222-8039.

Todas las solicitudes para programas de asistencia financiera (por ejemplo, préstamos estudiantiles, compensación de trabajo, subvenciones, becas, fondos especiales, subvenciones, premios, etc.), serán considerados por el Distrito de Riverside Community College independientemente de identificación étnica, origen nacional, religión, edad, género, identidad de género, expresión de género, raza, color, ascendencia, información genética, orientación sexual, discapacidad física o mental, o cualquier característica listados o definidos en la Sección 11135 del Código de Gobierno o cualquier característica que se encuentra en la prohibición de los crímenes de odio que requieran alojamiento de discapacidad. Por favor establecidos en la subdivisión (1) de la Sección 422.6 del Código Penal de California, o cualquier otra condición protegida por comuníquese con oficina

de Diversidad, Equidad y Respeto al (951) 222-8039. or la ley. Formatos alternos para este material están disponibles para personas