

# Merit Scholarship Appeal Form

(Please print neatly – illegible forms will be returned unprocessed)

Name: \_\_\_\_\_ Pitt Student ID: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Expected grad date: (month/year) \_\_\_\_\_

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Merit Scholarships are awarded to first-time, full-time incoming freshmen students who meet specific academic requirements. Students are reviewed for merit scholarships at the time of application review and will be notified of awards shortly after receiving their official letter of admission. These are annual awards that will be applied directly to the student's account – half in the fall and the remaining half in the spring. Eligibility for scholarship renewal is assessed at the end of each spring semester.

Merit awards are renewable with the following criteria:

1. Student maintains a 3.250 GPA each academic year.
2. Student remains a full-time student at the Greensburg campus.
3. Student must complete 24 new credits during the fall and spring semesters.

## Appeal Process and Form Instructions

1. Return this signed form and all required documentation to the address on the back of this form. Students wishing to submit an appeal must do so within 30 days of the end of the spring term.
2. Unsigned forms and those submitted without proper documentation will not be processed.
3. An appeal reviewed by the Appeals Committee does not guarantee reinstatement of the Merit Scholarship.
4. The Appeals Committee will review your appeal and supporting documentation. The Committee's decision will be sent to your Pitt email account within approximately ten (10) business days.
5. All appeal decisions made by the Appeals Committee are final.

### A. BASIS FOR APPEAL

1. Check the circumstance that applies to the reason for your deficiency. Appeals submitted without supporting documentation will not be considered.

\_\_\_\_ Serious medical illness or injury of student. A signed doctor's statement on office letterhead must be included.

\_\_\_\_ Death of an immediate family member. A death certificate, obituary or announcement, as well as indication of your relationship must be included.

\_\_\_\_ Other special and extenuating circumstances along with appropriate documentation.

2. Explain in detail your extenuating circumstances checked above and the circumstances that caused you to fail to meet the Merit Scholarship requirements.

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**B. STUDENT CERTIFICATION**

I certify that all of the information I have provided for this appeal is complete and accurate.

If this appeal is approved, I understand that the Merit Scholarship will be reinstated for the following academic year.

I understand that all appeal decisions are final.

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Submit completed form along with appropriate documentation to:**

**University of Pittsburgh at Greensburg  
Office of Financial Aid  
150 Finoli Drive  
Greensburg, PA 15601**

**FOR OFFICE USE ONLY:**

\_\_\_\_\_ **Approved**

\_\_\_\_\_ **Denied**

**Reason for denial:** \_\_\_\_\_

**Reviewed by:** \_\_\_\_\_ **(Initials)**     **Date** \_\_\_\_\_