



Board of Governor's Fee Waiver Appeal

Last Name: _____ First Name: _____ Student ID or SSN: _____

MVC Email (This is how you will be contacted): _____ Phone: _____

Have you applied for the current year's FAFSA? Yes No (if no or unsure, please see Student Financial Services before submitting this form).

Loss of Board of Governors Fee Waiver (BOGW):

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

Students have the opportunity to appeal if they meet and can document an approved circumstance. To complete the appeal process, complete the following steps:

1. Indicate the reason for your appeal by choosing one of the approved circumstances:
 - Extenuating Circumstances (for example: accident, illness or other circumstance beyond the control of the student): Official documentation must be attached
 - Student with disabilities who applied for but didn't receive accommodation in a timely manner
 - Student who can demonstrate significant academic improvement
 - Change in economic situation (documentation may be required)
 - Evidence that student was unable to obtain essential support services
 - Special consideration of factors for CalWORKs, EOPS, DSPS and Veteran Students
2. Attach a personal statement regarding the above circumstance, and provide supporting documentation.
3. Indicate the term and year you are appealing for:
 - Fall ____
 - Winter ____
 - Spring ____
 - Summer ____

Submit this appeal form with all required attachments to the Admissions and Records office for review. A response will be sent to your RCCD student email address within 3-5 business days informing you of the appeal's outcome. Please check your email daily for this response.

If you are submitting an appeal for both the BOG Waiver and the Registration Appointment, please know that you can submit both forms with one statement and one set of documentation together.

I understand that by submitting and signing this form, I am not guaranteed a BOG fee waiver. I confirm that all information I have presented as part of this appeal is true and accurate.

Student Signature: _____ Date: _____

*******For Office Use Only *******

Approved Email to Student Email to Financial Aid

Pending Email to Student

Denied Email to Student **Authorized Signature:** _____ **Date:** _____