

**SOUTH CAROLINA
HIGHER EDUCATION TUITION GRANTS
COMMISSION**

800 Dutch Square Boulevard, Suite 260A
Columbia, SC 29210-7317
Phone: (803) 896-1120, FAX: (803) 896-1126

REQUEST FOR REVIEW OF SC TUITION GRANT ELIGIBILITY

PLEASE NOTE: TO BE CONSIDERED, ALL APPEALS, WITH COMPLETE DOCUMENTATION, MUST BE RECEIVED BY THE COMMISSION'S APPEALS COMMITTEE BY NOVEMBER 15.

STUDENT'S NAME _____

SOCIAL SECURITY NUMBER _____ DATE _____

ADDRESS _____
Street City State Zip Code

PHONE NUMBER (_____) _____

COLLEGE _____ ACADEMIC YEAR _____

PLEASE PROVIDE A LETTER AND ANY OTHER SUPPORTING DOCUMENTATION DESCRIBING THE BASIS FOR YOUR REQUEST.

The Commission can better review your situation and make a quicker decision concerning your request if you submit clear explanations and reasonable documentation. Your request should include the following essential components:

1. A clearly written letter explaining the situation with sufficient information for the review committee to make a decision. The letter **MUST** be signed by the student **and** the student's parent(s), if the situation involves them, or the spouse, if the student is married.
2. Provide dates concerning the situation including, if applicable, a date for an expected end of the situation.
3. If your request for a review involves a change in income, assets, family size, or number of family members attending college, you must first approach your college's financial aid office concerning a "Professional Judgement Review." If your request is approved by your college's financial aid office, your financial aid administrator should provide all relevant information directly to the Commission.

PLEASE ALLOW 2 TO 4 WEEKS TO COMPLETE PROCESSING OF YOUR REQUEST.