PO BOX 145114

PRIME GRANT SCHOLARSHIP

SALT LAKE CITY, UT 84114-5114 SCHOLARSHIPS@USHE.EDU



## APPEAL RULES AND INSTRUCTIONS

- 801-646-4812 Under Board Policy (R765-607-9), PRIME applicants have the right to appeal an adverse decision.
- Appeals must be submitted within 30 days of the date of the denial notification sent to the student. •
- Documents can be mailed to the scholarship office or emailed to our scholarship email address. See the top right corner for the address and email address.
- The appeal must provide evidence that the adverse decision was made in error and that, in fact, you met • all scholarship requirements and submitted all requested documentation by the deadline. Appeals filed in an attempt to change the scholarship requirements are beyond the scope and purpose of the appeals process. Scholarship staff and the appeal committee do not have the authority to consider, adjust, or award a TRANSFORM certificate. Request for reconsideration for TRANSFORM certificate eligibility should be submitted through USBE before filing for an appeal with USHE.
- An appeal filed before you receive an official notification regarding your application will not be considered. •
- A submission of an appeal does not guarantee a reversal of the original decision. •
- As the student applicant, it is your responsibility to file the appeal, including all supplementary documentation.
- It is estimated that the notification of the decision regarding an appeal will be sent to the student via the email included below 4-6 weeks after receipt of all appeal application documents.

| First Name                                | Middle                      | Last        |
|-------------------------------------------|-----------------------------|-------------|
| Mailing Address                           |                             |             |
| City                                      | _ State Zip                 |             |
| Cell phone Number                         | Home phone Number           | er          |
| E-mail address                            |                             |             |
| High school you attended last             |                             |             |
| If you are currently in college, list the | e college you are attending |             |
| The appeal is related to (mark all that   | t apply):                   |             |
| □ Academic Requirements                   | □ Documentation □ Applica   | ation Error |
| Other, please specify                     |                             |             |

- You are required to include a typed statement, written by you, the scholarship applicant, detailing why you • are appealing and including information to support your appeal. Include all information you would like the committee to consider. Please use 12 point font with page margins no smaller than 1 inch for readability.
- You have one opportunity to appeal, therefore it is vital to include all supporting documentation you want the • committee to consider. For example, if your transcript had an error on it, please include a new transcript showing that the error has been corrected. Failure to include supporting documentation could impact the outcome of the appeal. If you choose to include supporting documents, please list the documents you are including:

I understand and agree to the appeal application rules as outlined above. I certify that all information provided regarding this appeal application is true and accurate.

Student Signature

Date