



Office of Financial Aid
Washington State Community College
710 Colegate Drive
Marietta, OH 45750
E-Mail: finaid@wscc.edu
P: 740.568.1908
F: 740.376.0257

WSSC CCP Third Degree Form Washington State Community College Financial Aid Office

This form is to be completed only by students who have completed two associate degrees through the Washington State Community College PSEO program and would like to complete a third and final degree/certificate. Please read this form carefully, meet with your academic advisor, complete all the required paperwork, and submit the completed packet to the Financial Aid Office at Washington State Community College.

SECTION A: STUDENT INFORMATION AND INSTRUCTIONS

NAME:

Last	First	MI
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SOCIAL SECURITY NUMBER: _____ - _____ - _____ PHONE #: _____

ADDRESS:

Street	City	State	Zip
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Please follow the instructions in "Section B" and sign the "Certification Statement in Section C". You should review and familiarize yourself with the Satisfactory Academic Progress policy at the www.wscc.edu website.

Your appeal will be reviewed and you will be notified by mail of our decision within 10 business days. If your appeal is denied, you must find alternative financial resources to attend WSSC. Submit this form and supporting documentation to:

Washington State Community College
Financial Aid Office
710 Colegate Dr.
Marietta, OH 45750

SECTION B: STEPS OF APPEAL - TO BE COMPLETED BY STUDENT

- Please indicate below which situation best applies to your appeal:**
 I was a high school student who participated in the Washington State Community College PSEO and completed two associate degrees while enrolled in the program.
- Please provide a *signed* personal statement (printed clearly or typed) on a separate sheet explaining what degree or certificate you would like to complete. In addition, please explain how this additional degree or certificate will fit into your career pathway.**
- A supporting Academic Advisor statement is required. Your advisor must complete the statement below and attach a degree audit for the program you would like to complete.

Academic Advisor Statement:

Advisor: Please outline the courses needed to complete requested program and include the anticipated graduation date. Please complete a degree audit for this student and include it with this paperwork.

(Attach a separate page if necessary)

Academic Advisor's Name: _____ Date: _____

Signature: _____ Extension: _____

Section C: CERTIFICATION STATEMENT (Completed by ALL Students)

I have read the Washington State Community College Satisfactory Academic Progress Policy. I am submitting a complete PSEO Third Degree Form.

My signature certifies the information provided to the WSCC Financial Aid Office on this form and all accompanying documentation is true and accurate to the best of my knowledge. I agree to provide additional documentation if requested.

Student's Signature

Date

For office use only		
_____ Incomplete Appeal Form	_____ Complete Appeal Form	
Appeal Committee's Decision		
_____ Denied		
_____ Approved		
_____ Approved with Stipulations		
_____ _____ _____ _____		
_____ Committee Member's Signature Date	_____ Date	_____ Committee Member's Signature