

Office of Student Financial Aid

103 Wilder Tower Memphis, TN 38152

Phone: 901.678.4825 **Fax:** 901.678.3590

Web: www.memphis.edu/financialaid

2023 - 2024 ATHLETIC GRANT-IN-AID REQUEST FOR APPEAL

SECTION A – STUDENT INFORM	ATION
Student Name:	U ID Number:
Phone Number:	University Email:
Athletic Team Affiliation:	Head Coach:
SECTION B – APPEAL EXPLANA	ΓΙΟΝ AND JUSTIFICATION
statement below. Use additional or a se	ation of the basis for your appeal along with documentation to support your parate page if necessary. If using a separate/additional pages, please include with your submission of this completed form.
SECTION C – STUDENT ACKNOW	VLEDGMENT AND CERTIFICATION
and correct to the best of my knowled officials to verify any information of violation of the University of Memp	hat all statements and information provided on this form are true, complete, ge and will provide proof if requested. I authorize University of Memphis in this form by contacting any person/organization. I understand it is a his Student Code of Conduct to purposefully give false or misleading be subject to University of Memphis sanctions.
Student Signature:	Date: SNATURES CANNOT BE ACCEPTED)
(TYPED SIC	SNATURES CANNOT BE ACCEPTED)

SECTION D – SUBMISSION

Submit this completed appeal form and all supporting documentation <u>via email</u> to:

Andrew B. Linn
Executive Director of Student Financial and Scholarships
University of Memphis
ablinn@memphis.edu

Appeals must be submitted **within 10 business days** of the date on the latest Athletic Grant-In-Aid notification. Appeals received after the deadline will not be considered.