

Student Assistance Fund Appeal Form

Important: Please return your completed form (with documents) to the Student Services Office no later than 5 working days from the date of notification of the Committee's decision (date of email).

Please note: Incomplete forms or those without new information or revised documents will not be progressed.

Appeals may only be submitted if there is new information or relevant documentation that the SAF Committee were not aware of when making their decision that you wish to have considered.

Only ONE appeal per application can be submitted

Student Name: _____ **Student ID:** _____

Please give reasons why you wish to appeal the decision of the SAF Committee:

Outline the new information you are providing to support your appeal:

I give consent to SETU Carlow to retain my details for Student Assistance Fund purposes.

Signed: _____ Date: _____

For office use only:

Date appeal received:	Appeal approved:
Category:	Amount:
Appeal declined:	Reason:
Signed:	Date:

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