

## Virginia-SARA Application Appeals Form

Complete this form in its entirety and mail it along with your formal letter and documentation supporting your appeals request.

Mail to the State Council of Higher Education for Virginia (SCHEV), James Monroe Building, 10th Floor, 101 North 14th Street, Richmond, Virginia 23219.

Institution Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, VA Zip: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

Name of Secondary Contact: \_\_\_\_\_

Secondary Contact Email: \_\_\_\_\_

Type of Application:             Initial                             Renewal

Date Application denied by SCHEV: \_\_\_\_\_

In 300 words or less, describe why you are filing an appeal. The description should be restricted to reasons the application denial violates NC-SARA and/or Virginia policy. No other reasons are allowable.

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Signatory (President or Chief Academic Officer) Typed Name: \_\_\_\_\_

Signatory (President or Chief Academic Officer) Signature: \_\_\_\_\_

Signatory Officer Title: \_\_\_\_\_

Date Signed: \_\_\_\_\_