

**Jackson State Community College  
TELS Request to Institutional Review Panel  
For Exemption of Timely Enrollment**

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

Student SSN \_\_\_\_\_

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

Phone \_\_\_\_\_

\_\_\_\_\_

Email \_\_\_\_\_

*Students who are unable to timely enroll in an eligible postsecondary institution as required due to medical or personal reasons may appeal to the Institutional Review Panel for an exception. **Approval can only be granted when there are documented medical or personal grounds.***

*If your request is approved, your TELS award for the semester in which you began enrollment will be awarded. If your request is denied, you may appeal directly to the Tennessee Student Assistance Corporation (TSAC) to the TELS Award Appeal Panel. If you have not been accepted for admission at JSCC, you may appeal directly to TSAC.*

**I hereby request approval to begin enrollment at Jackson State \_\_\_\_\_ semester due to:**  
future semester/year

- Extended illness of student –
  - *Attach a letter from your doctor indicating the type of illness, the date of the onset, and if you are still under a doctor's care or have been released.*
  
- Extended illness or death of an immediate family member –
  - *Attach a letter from the doctor indicating the name of the patient, relationship to you, the type of illness, the date of the onset, and if the patient is still under a doctor's care or has been released. In the case of death, attach a copy of the obituary, notice of death from the newspaper or death certificate. Indicate the deceased's relationship to you.*
  
- Extreme financial hardship of student's family member –
  - *Attach a letter explaining in detail the nature of the extreme financial hardship and what action the family is taking to deal with this hardship. Attach documentation detailing the current income of the family, outstanding medical expenses not covered by insurance, etc. If legal action has been taken, attach copies of court documents to support your request.*
  
- Other extraordinary circumstances beyond the student's control where timely enrollment created a substantial hardship –
  - *Attach a letter detailing the extraordinary circumstances beyond your control, and why those circumstances prevent you from fulfilling a particular eligibility requirement.*

Document requirements: All letters must bear the signature of the author and contain the name of the student. All other documentation must be identified as to the source.

I certify that the information and documentation submitted for appeal is true and accurate to the best of my knowledge.

\_\_\_\_\_

\_\_\_\_\_

Student Signature

Date