# ALASKA PERFORMANCE SCHOLARSHIP (APS)

## Appeal Form for Public School Students

_____ School Year Only

**AS 14.03.113. District determination of scholarship eligibility.**

A district shall provide a student with an opportunity to request that the district correct an error in the eligibility determination.

**The following information is required for the school district to evaluate your appeal to receive an APS scholarship. Complete this form and return it to your school district. Please print to ensure information is legible.**

Last Name_____ First Name_____ M.I._____ DOB_____ AKSID_____

Permanent Mailing Address_____ City_____ State_____

Zip_____ Home Phone_____ Cell Phone _____ Email_____

Did you meet the minimum GPA of 2.5, or test scores of ACT 21 or SAT of 1060 or WorkKeys Level 12 (no score below a 4 in each subject area)?    Yes_____No_____

My ACT score is _____        My SAT score is_____        My WorkKeys score is _____        My GPA is_____

Did you meet the curriculum requirements for your class year?    Yes_____        No_____

Were your requirements met by high school graduation? Yes____        No_____

Provide a concise statement identifying the reasons supporting a reversal or modification of the school district's eligibility determination. **Note:** Failure to meet APS requirements for reasons other than those allowed for under the statutes and regulations governing the APS does not entitle the applicant to a reversal or modification of eligibility. You may use a separate sheet of paper.

_____
_____
_____
_____
_____

**Provide documents, papers, or other materials that support a reversal or modification of the districts eligibility determination. This may include:**

- o   **ACT and/or SAT score report (s) (an official copy from the ACT/SAT )**
- o   **WorkKeys score (if taken outside of the school district)**
- o   **Statement**
- o   **Transcript**

Student Signature_____ Date_____

School District Review and Signature_____Date_____

School District should submit this Signature form and record change to:

APS Program Coordinator
Alaska Department of Education & Early Development
P.O. Box 110500  Juneau, Alaska 99811-0500
Phone: (800) - 441 - 2962

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ACPE@alaska.gov

SAMPLE