



Medical Documentation Support Form

Name: _____ NMC Student ID: _____

Medical documentation in support of a NMC Refund Exception request and/or an appeal of financial aid suspension due to failure to meet the standards of academic progress (SAP) for financial aid.

STUDENT INFORMATION: For student to fill out prior to giving to healthcare provider.

Patient Name: _____

Are you the patient? ___ Yes; ___ No - If No, what is your relationship to the patient? _____

Patient Release: I give my permission for the following information to be provided to Northwestern Michigan College and if necessary, for a representative from Student Financial Services to contact the health care provider who signs the form.

Signature

Date

HEALTHCARE PROVIDER INFORMATION: To be filled out by healthcare provider only. Please do not leave any items blank.

Initial appointment: _____ Initial diagnosis: _____ Follow-up appointments: _____
Date Date Date(s)

Was the patient admitted into the hospital? ___ Yes ___ No if yes, give dates: _____

Was the patient (if the student) advised not to work? ___ Yes ___ No if yes, give dates: _____

Was the patient (if the student) advised not to attend school? ___ Yes ___ No if yes, give dates: _____

Could procedure(s) and/or hospitalization been scheduled at a later date and/or during times that would not have interfered with the student's attendance of classes? ___ Yes ___ No

Is the student now able to return to school? ___ Yes ___ No

What impact did the diagnosis have on the student's ability to work, attend class, complete school work?

HEALTHCARE PROVIDER SIGNATURE AND AGREEMENT

By signing below, you are attesting that the patient was seeking and receiving the proper care and was following the proper protocol and medical provider's orders to not attend and/or participate in classes during the dates noted above. You may be contacted for additional information.

Organization: _____ Phone number: _____

Name: _____ Title: _____

Signature: _____ Date: _____

Please sign and fax the completed form to Northwestern Michigan College Financial Aid Office, 231-995-1937. If you have any questions, please contact us at 231-995-1035.

NMC does not discriminate based on any characteristic protected by law in its programs and activities.