

<p align="center">For Office Use Only:</p> <p>_____ Insufficient Grade Point Average</p> <p>_____ Insufficient Credit Hours Earned</p> <p>_____ Exceeded Semester Limits</p>

Satisfactory Academic Progress (SAP) Appeal for Financial Aid

Name: _____ **Student ID:** _____

Email: _____ **Phone:** _____

Please indicate which upcoming semester this appeal is for:

Fall _____ Spring _____ Summer _____

Have you previously filed a SAP appeal? Yes (Indicate when) _____ No

Please respond (on separate paper) in writing to both of the following requests:

1. Describe any and all legitimate circumstances that prevented you from meeting the required SAP standards; i.e. prolonged illness, medical emergencies, accident or injury to student or a significant person in his/her life, death of a family member or a significant person in the student's life, divorce by student or parent or other documented overwhelming personal circumstances. Please be sure to describe how this situation affected your ability to fulfill your academic responsibilities and include any necessary supporting documentation such as letters from physician, divorce decree, accident report, death certificate, etc.
2. Outline all action(s) you intend to take to improve your academic performance and how you plan to make up credits and/or increase your GPA. Please include other possible supporting documentation such as letter from academic advisor, change of major, etc.
3. If your appeal is approved, you will be scheduled to meet with the Student Success Center to outline an academic plan early during the next semester.

** My signature below indicates that all of the information I have provided pertaining to this appeal is true and complete to the best of my knowledge. I understand that I am not eligible to receive aid until this appeal has been reviewed and approved in writing by the Office of Student Financial Planning.

Signature of Applicant

Date

<p>For Office Use only:</p> <p align="right">Date: _____</p> <p><input type="checkbox"/> Appeal Approved <input type="checkbox"/> Appeal Denied <input type="checkbox"/> Other</p> <p>Comments: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Financial Aid Counselor</p>	<p>_____</p> <p>Director of Financial Aid</p>
--	---