Instructions for Filing the Satisfactory Academic Appeal Form for Undergraduate Degree

Any student whose eligibility for financial aid, scholarships, stipends, or employment has been terminated for academic reasons may appeal that decision to the Satisfactory Academic Progress (SAP) Standards Committee by following the procedures explained below. The Appeal Committee will consider appeals prior to classes beginning each semester.

These instructions are provided to assist in the completion of the SAP Appeal Form. Please read and follow the instructions carefully. **Incomplete appeal forms and appeals with no supporting third party documentation will be denied.**

Completed appeals for any term/semester must be received in the Financial Aid Office by the following established priority deadlines:

- Fall 2019 Semester – Friday, August 2, 2019
- Spring 2020 Semester – Thursday, January 2, 2020

**General Instructions:**

1. Complete the enclosed SAP Appeal Form and submit any additional information requested.
   a) **General Information** is to be completed by the student.
   b) **Section I** must be completed by the Academic Advisor.
   c) **Section II** will be completed by the Financial Aid/VA Office.

2. You must include a **signed and typed detailed personal statement** that addresses the following:
   a) The reason(s) that you failed to meet the SAP standards. If these circumstances covered more than one semester, address the relevant circumstances for each semester that you did not meet the standard(s). If your circumstances cover a period of time in which you were not enrolled, it is not relevant to the appeal. Therefore, those circumstances could not prevent you from being successful if you were not enrolled.
   b) How the circumstance(s) that prevented you from meeting the SAP standards have now been resolved.
   c) What you intend to do to meet the satisfactory academic progress requirements by the end of your next term of enrollment.

3. You must provide official documentation to confirm your extenuating circumstance(s), such as third-party statements (e.g. physician, counselor, lawyer, social worker or clergy), police reports, obituary or death certificate, court documentation or other professional(s) detailing the reasons for your inability to meet the SAP standards. Consideration for extenuating circumstances includes:
   a) Physical/mental health: need documentation from a doctor (signed)
   b) Change in work schedule: need documentation from employer
   c) Death: need copy of death certificate as documentation
   d) Divorce or separation: need documentation from court or attorney
   
   **Examples of unacceptable circumstances include (but are not limited to):**
   a) The need for financial aid
   b) Withdrawal to avoid a failing grade(s)
   c) Too many courses attempted because of major changes
   d) Repeating courses for a better grade
   e) Disagreement with the professor(s)
   f) Voluntary change in work schedule

4. Return the completed appeal form and official supporting documentation to the Financial Aid/VA Office.
5. You will be notified in writing of the results of the committee’s decision within seven (7) days after the committee’s review of your appeal.
Satisfactory Academic Appeal Form for First Undergraduate Degree

SECTION A: Student Information

____________________________   Check One: ☐ Fall/Spring/Summer ☐ Fall/Spring ☐ Summer

Academic Year

Last Name ___________________ First Name ___________________ Middle Name ___________________ Student VIP ID ___________________

Email Address ___________________ Telephone Number ___________________

Student’s Signature ___________________ Date ___________________

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SECTION B: Academic Advisor / Academic Counseling Center – Must be completed by Academic Advisor

Student’s Current Major ___________________ Expected Graduation Date ___________________

Hours Earned Toward Degree ___________________ Hours Remaining Toward Degree ___________________

*This is to certify that the above referenced student has been seen by me and that he/she will be able to continue in his/her program of study.*

Academic Advisor / Counselor’s Signature ___________________ Date ___________________

Printed Name and University Title / Position ___________________

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SECTION C: Financial Aid / Veterans Affairs Office – Must be completed by the Financial Aid / Veterans Affairs Office

Appeal Term ___________________ Cumulative Grade Point Average ___________________ Hours Attempted ___________________

Hours Earned ___________________ Completion Rate ___________________ Maximum Time Frame ___________________

SAP Appeal(s) ___________________

Comments / Recommendations:

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SECTION D: Satisfactory Academic Standards Committee – for the Committee’s use only

Appeal Approval Based On: ☐ Traumatic Extraordinary Event ☐ Death (Immediate Family Member) ☐ Personal Illness of Student ☐ Immediate Family Member Illness ☐ Divorce or Separation ☐ Change in Work Schedule

Appeal Approval Period ___________________ Appeal Denied: ☐

Academic Plan/Stipulation and Comments:

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________________________________________________________________________

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Signature (Chairperson of Committee) ___________________ Date ___________________