



Satisfactory Academic Progress Appeal Form

Name _____

Student ID No. _____

Students who have lost their eligibility for financial aid due to lack of satisfactory academic progress may appeal for reinstatement of their eligibility if circumstances beyond their control prevented them from meeting the established standards. To appeal, submit all of the items outlined below. Your responses should be provided on separate paper and attached to this form with the supporting documentation. All statements provided should be TYPED. Submit **complete** appeal to your academic advisor for completion. The academic department will forward the appeal to the Office of Scholarships and Financial Aid.

Please indicate your Anticipated Graduation Date: _____

Semester or academic year for which you are requesting reinstatement of your financial aid _____

Reason for Appeal: _____ GPA _____ Completion Percentage _____ Time Frame _____

(check all that apply)

Deadline to submit Appeal:

Fall 2008 - November 14, 2008

Spring 2009 - April 17, 2009

Summer 2009 - June 5, 2009

*****Note: your appeal will not be accepted or reviewed until the current semester's grades have been evaluated.*****

1. Provide your own statement describing the reasons and the circumstances that caused you to fail to meet the required standards. It is important that you demonstrate a clear and thorough understanding of why you experienced academic difficulties so that you will be able to take sufficient steps in the future to improve your academic performance and meet the prescribed standards. Be specific in your explanation since incomplete information may cause a delay in the review of your appeal or a denial of your request.
2. Provide a second statement outlining the specific steps you intend to take in the next semester to improve your academic performance. This statement should be thorough and detailed, demonstrating your commitment to achieving the required grade point average and/or percentage of completed credits.
3. See your academic advisor and have him/her complete the section below. It is necessary to seek their assistance in developing a plan of academic support that will assist you in meeting the standards of satisfactory academic progress. The form will not be complete if advisor signature is missing.
4. Attach documentation that supports your appeal. If, for example, the deficiency was caused by medical problems or personal injury, provide supporting evidence from a physician or hospital. Other forms of documentation might include a letter from a counselor or therapist, copy of obituary or death certificate in the case of the death of a family member, etc.
5. If you are appealing for more time to complete your degree, please include an evaluation from your department that clearly shows how many hours you have remaining to complete your degree.

Academic Advising

Submit your completed appeal form to your academic department for review. Your academic advisor is located in the department of your major. If you have not declared a major, you may contact University College. Upon completion of review the academic advisor will forward the appeal to the Financial Aid Office for processing. An advisor's favorable recommendation does not guarantee your appeal will be approved.

Advisor Name: _____ Phone: _____

(please print)

Advisor Signature: _____ Date: _____

_____ I recommend approval

_____ I do not recommend approval

Advisor Comments (if applicable): _____

To the best of my knowledge, all of the information contained in this appeal is complete and correct. I understand that I am responsible for any payment due unless notified that my appeal has been approved and I will be receiving financial aid.

Please allow 2-3 weeks for your appeal to be reviewed

Applicant Signature _____ Date _____

Committee Action: _____

_____ Date _____