



Student Name: _____ Student email: _____

Satisfactory Academic Progress (SAP) Appeal

We understand that unexpected events can impact a student's studies. For students who lost financial aid eligibility due to not meeting the Satisfactory Academic Progress requirements as defined in the College Catalog, an appeal may be submitted if the cause was due to an extenuating circumstance. All appeals are reviewed by the Director of Financial Aid. Decisions are final and cannot be appealed. If approved, your financial aid will be reinstated on the condition that certain academic requirements be met to maintain eligibility. If denied, you will remain ineligible for financial aid and will be responsible for any charges associated with your enrollment.

Please include a typed statement to explain the extenuating circumstances for your failure to earn academic credit during the time period that you received federal aid. You must include supporting documentation to support your written statement.

Please indicate which situation applies to your academic difficulty:

- **Medical:** If a personal medical problem contributed to your failure to maintain satisfactory academic progress, attach documentation from a medical professional from whom you have received advice or treatment.
- **Death/Illness:** If the death or illness of an immediate family member contributed to your lack of academic progress, please attach appropriate copies of medical records, death certificate, obituary etc.
- **Military Service:** If you have withdrawn due to military service, provide documentation.
- **Other Circumstances:** Please clearly state the circumstances (not listed above) in your appeal letter and provide appropriate documentation.

Note: Circumstances related to the typical adjustment to college life such as working while attending school, financial issues related to paying bills and car maintenance/travel to campus, are not considered as extenuating for purposes of appealing suspension of financial aid.

Certification and Signature:

If my appeal is DENIED, by signing below I understand that decisions are processed on a case-by-case basis and the committee may deny any SAP appeal. I also understand that the decision of the appeal is final.

If my appeal is APPROVED, by signing below I recognize that I am expected to make satisfactory academic progress

I understand that if I do not meet these requirements I will be ineligible to receive financial aid and will be responsible for payments toward my student bill until I meet the satisfactory academic progress standards.

Student Signature _____ Date _____