



# SATISFACTORY ACADEMIC PROGRESS APPEAL FORM

## SECTION A - STUDENT

Student Name \_\_\_\_\_ ID \_\_\_\_\_

Student's Academic Program \_\_\_\_\_ Student's Classification FR SO JR SR GR

1. Check the basis on which your Federal/State financial aid was denied:

- Insufficient GPA
- Insufficient Pace of Completion
- Did Not Meet Academic Plan Requirement
- Maximum Time Frame Exceeded (**Skip to Section B**)

2. Check the reason you were unable to maintain Satisfactory Academic Progress during the previous term

- Death or major illness within immediate family
- Personal illness or injury
- Other special circumstance

3. Please explain the specific circumstances that prevented you from making Satisfactory Academic Progress during the previous academic semester. Attach as many additional pages as needed to fully explain your individual circumstance(s).

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4. Please explain what has now changed and/or how you will address the circumstance(s) described above so that you can successfully complete your academic program. Attach any additional pages or provide additional documentation as needed.

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## SECTION B – ONLY STUDENTS EXCEEDING MAXIMUM TIME FRAME DUE TO CHANGE OF MAJOR

Please visit the Academic Center have the appropriate Degree Auditor of your new major (or Graduate/Adult Studies Program Coordinator) complete the following section and provide his/her signature.

Student's original major _____	Student's current major _____
Number of academic credits toward program _____	Additional credits needed to complete program _____
Degree Auditor/Program Coordinator Signature _____	Date _____

**Submit completed form to Office of Student Financial Planning for review. You may be contacted to discuss an Academic Plan with a Financial Aid Advisor. You will be notified of the results of your appeal.**