Satisfactory Academic Progress
Appeal Form To Request A Waiver Of the Standards
2009 - 2010

Student's Name: _____
ID # or Social Security Number: _____
Date: _____

Complete the information below if you wish to appeal the financial aid satisfactory academic progress policy. **Return this form to the Financial Aid Office as soon as possible**. **Appeals must be in writing. Phone appeals will not be considered. Applicants will be notified in writing of the committee's decision.**

Appeals may be granted based on the reasons listed below. Please check the reason(s) below that apply to your situation. **Attach documentation verifying your situation. Appeals without documentation will be denied.**

- ❑ Prolonged illness, serious accident, or death involving a close family member
- ❑ Previously undiagnosed learning disabilities.
- ❑ Recall to active military duty
- ❑ Other extraordinary circumstances

In the space below, write a detailed explanation as to why you should be granted a waiver of the SAP standards. **Focus on the extraordinary circumstances** that have prevented you from making satisfactory progress **during the time that you have been enrolled.** Attach a separate sheet if you need more space.

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