



Financial Aid Satisfactory Academic Progress (SAP) Appeal Form

Student Name: _____ ID # _____

Phone # () _____ Email: _____

Current Program of Study: _____ ** Attached degree audit

I am appealing: ____ Summer 2014 (Priority deadline is May 23, 2014) ____ Fall 2014 (Priority deadline is August 15, 2014)

Financial Aid SAP Appeal Checklist - This form must be completed and submitted as a cover sheet to the Financial Aid Office. Your Financial Aid SAP appeal is not complete until all documents are received. **Attach the following:**

- ☐ Financial Aid Personal Statement Form
- ☐ Supporting documentation which proves extenuating circumstance
- ☐ Copy of current degree audit (available for print via TSC Online)
- ☐ Financial Aid Academic Plan

Type of Appeal - Check all that apply.

- ☐ **For Veteran's Hazlewood benefits only.**
- ☐ **GPA** – If this appeal is based upon your cumulative grade point average, address the issue of completed courses with a grade lower than 2.0 for undergraduate studies.
- ☐ **Pace** – If your pace (hours completed divided by hours attempted) is lower than 70%, address any courses in which you received a withdrawal (W), and Incomplete (I), or a Failing Grade (F).
- ☐ **Timeframe (Maximum Hours)** – If your appeal is based on exceeding the specified total of attempted credit hours for the completion of your degree, address the need to enroll in a greater number of credit hours than is normally associated with the completion of the degree requirements. Please indicate if you are a transfer student, have recently changed majors, or were required to enroll for developmental or preparatory courses.

Reason for Appeal - Attach supporting documentation. Indicate below which situation best describes the challenges you have experienced and how they impacted your prior academic performance.

- ☐ **Medical** – If you experience a medical condition, illness, or injury which resulted in Financial Aid Suspension, attach documentation confirming you received medical treatment for the semester (s) affected.
- ☐ **Death/Illness** – If the death or illness of a family member had a negative impact on achieving your academic goals, please attach appropriate copies of medical records, death certificate, or obituary, etc.
- ☐ **Other Circumstances** – Please explain extenuating circumstance(s) and attach appropriate documentation. Note: If you have already earned a degree, provide a copy of your earned degree audit, which can be accessed via TSC Online.

Certification: I understand decisions on appeals are on a case-by-case basis. If approved, I must meet the conditions of my appeal for the duration of my Academic Plan. I will be notified if any further information is needed and of the committee's decision by email. Any fees I may owe the institution are due on the date specified regardless of the appeal status.

Signature: _____

Date: _____