

**Satisfactory Academic Progress
Financial Aid Appeal Form**

Please TYPE your responses on this form

Student Name: _____ Student ID: _____

Address: _____

Telephone: _____ Email: _____

Year in School: FR SO JR SR Graduate Major: _____

SEMESTER and YEAR you would like financial aid reinstated: _____

Please describe in detail the unique and extenuating circumstances under which you were unable to fulfill the requirements of the Satisfactory Academic Progress (SAP) Policy for Financial Aid Eligibility. Appeals for reinstatement of aid should specifically reflect unique circumstances beyond the control of the student and should provide resolution to circumstances and include documentation as necessary. You must clearly indicate how your circumstances have changed so that you can comply with the policy in the future. Explanations of your need for financial aid are not necessary, as your application for aid details this information. **The appeal must include all necessary documentation to support the existence of extenuating circumstances described and evidence that the circumstances have been resolved.** Appeals based upon circumstances that were under the control of the student are rarely approved.

Students seeking to reestablish financial aid eligibility remain ineligible to receive financial aid assistance or deferment of payment until the appeal process is complete and a decision has been made by the Office of Financial Aid. Students should be prepared to pay tuition, fees, and other educational expenses until s/he has been approved to receive financial aid. If your appeal is approved, you are not guaranteed replacement of any previously awarded financial aid package.

Please submit the following required documents to complete your appeal:

- SAP Financial Aid Appeal Form**
- Personal Statement (typed)**
- Supporting Documentation**

A decision will not be made on your appeal until all required documents have been received. Submission of an appeal does not guarantee approval. **Late and/or incomplete appeals will not be accepted.**

Please upload your complete appeal packet to your FA Student Portal by the deadline

Student Signature: _____ Date: _____