

Satisfactory Academic Progress Appeal Form

Student Name: _____

Student ID Number: _____

Phone Number: _____

Email: _____

Please read below carefully. Incomplete forms will not be reviewed.

SAP Appeal is for students who are not meeting one or more of below standards:

- Grade Point Average: Undergraduate student below 2.0 in cum GPA, Graduate student below 3.0 in cum GPA.
- Units Attempted: Student enrolled in full-time (12+ units) must complete a minimum of 67% of their attempted term units.
- Maximum Time Frame: Undergraduate students may not exceed 150% of the published length of the student’s program measured in total units attempted.

Part 1: Student’s Letter of Appeal

You must submit a letter with this form explaining the reason for your appeal. Statement should be typed and not more than two pages. Make sure to include below items:

- What caused your work at MCU to fall below acceptable standards? Think carefully and be specific.
- How have those conflicts been resolved?
- How do you intend to maintain good academic standards and progress toward your degree if your appeal is granted?

If you have any supporting documentation, please submit it with this form.

Part 2. Academic Plan

Before a decision can be made concerning your Satisfactory Academic Progress appeal, you and your academic advisor must submit an academic plan to our office. **If your appeal is approved, you will be expected to meet the enrollment goals set for each semester.** We encourage you and your academic advisor to be realistic when planning the number of units you will complete each semester. Failure to meet goals established here will result in forfeiture of future financial aid.

Part 3. Conditions of Appeal

Please read and sign below. Your signature indicates your understanding of the conditions of your appeal and that all information reported on this form and any attachments are true, complete, and accurate.

- I understand that if my SAP appeal is approved, I will be placed on Financial Aid Probation.
- I understand that while on Financial Aid Probation, I will be required to follow the approved Academic Plan attached.
- I understand that failure to follow my approved Academic Plan will result in denial of financial aid.
- I understand that if I am placed on financial aid probation and do not meet the minimum academic progress requirements, it will result in denial of financial aid.
- I understand that false statements and/or misrepresentations will result in denial, reduction, withdrawal, and/or repayment of aid disbursed and student disciplinary action may be taken.

Student Signature: _____

Date: _____

FOR OFFICE USE ONLY

Approved

Approved with Condition (list below)

Denied

GPA: _____

Pace: _____

Comment: _____

Financial Aid Office Signature: _____

Date: _____

Director of Financial Aid Signature: _____

Date: _____