



2018-2019
Satisfactory Academic Progress Appeal

Student ID _____ Fall _____ Spring _____ Summer _____
Last Name _____ First Name _____

In order to submit a Satisfactory Academic Progress Appeal you must:

- Have a completed a 18-19 FAFSA/Dream Act Application
• Be registered for class
• Submit the completed appeal in person

Required Documentation for the Appeal

_____ Appeal form must be complete, signed, and your typed statement must be attached
_____ Documentation of Extenuating Circumstances (eg., police report, hospital records)
_____ Student Current Educational Plan completed with an academic Advisor or Counselor

Reason(s) for appealing

I am appealing for financial aid because:

_____ I completed less than 67% of the units I attempted
_____ I did not maintain a cumulative GPA of 2.00 or higher
_____ I exceeded the maximum number of units for my program of study
_____ All of the Above

Statement Instructions

Please attach a typed statement that addresses why you did not make satisfactory academic progress. The statement should include what extenuating or mitigating circumstances prevented you from meeting the SAP standard(s) that you marked above. Please also indicate in the statement how the situation that kept you from meeting the SAP standards has now changed or been resolved.

I hereby certify that the information provided on this form and all the attachments is true, complete, and accurate. I understand that if my appeal is approved I will be required to meet all conditions outlined on my LancerPoint portal to remain eligible for aid. Please note; the submission of an appeal is not a guarantee of approval. Your appeal will be reviewed by a committee in 4 to 6 weeks and you will be notified of the decision through your LancerPoint portal. Review and response times may vary during peak periods.

Student Signature _____ Date _____

Approval Code _____ Term _____ Signature _____ Date _____

Comments _____

Incomplete Code _____ Term _____ Signature _____ Date _____

Comments _____

Denial Code _____ Term _____ Signature _____ Date _____

Comments _____