



Office of Scholarships & Financial Aid Satisfactory Academic Progress Appeal Form

Please use this form, along with required supporting documentation, to appeal the suspension of your financial aid eligibility resulting from your failure to meet WSSU's minimum standards for Satisfactory Academic Progress (SAP). Only valid appeals with documented extenuating circumstances will be considered and reviewed. A valid appeal includes this Appeal Form, Appeal Statement, and all required documentation that supports the extenuating circumstances. All forms and documentation must be **typewritten and submitted TOGETHER by the appropriate deadline date**. **Incomplete appeals (without supporting documentation) will not be reviewed and will be automatically denied.** You will be notified in writing via email and in Banner Rams Online once an appeal decision has been made. A decision can take up to 3-4 weeks. **An appeal decision may impose limitations upon your financial aid eligibility and/or future minimum academic standards.** *Please note that approval of your SAP Appeal does not guarantee reinstatement of your original financial aid award package.* **Also, submission of documentation/appeal does not guarantee reinstatement of financial aid.** A copy of the Satisfactory Academic Progress Policy can be found on our website.

Full Name:

Banner ID#:

Term:

Year:

Appeal is for (check all that apply):

Grade Point Average (*Required Cumulative GPA of 2.0*)

#

Semester 67% Percentage Rate of completion

Maximum Timeframe (*Must attach list of remaining coursework*)

Description of Extenuating Circumstances and Required Documentation

Personal injury, illness, physical disability, or victim of a crime. REQUIRED DOCUMENTATION:

- ***Meet with Academic Success Counselor in University College (UCaLL) to obtain an Academic Success Plan.***
- ***Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.***
- ***If a victim of a crime; Copy of police reports of incident in which student was the victim.***
- ***If injury, illness or physical disability: Statement from healthcare provider detailing medical condition that impaired academic performance. The statement should specifically address the following:***
 1. ***Student's limiting medical condition and timeframe for which conditions existed.***
 2. ***How the condition may have impaired academic performance.***
 3. ***The student has rehabilitated to such an extent that the medical condition should not significantly impair future academic performance.***

Death/Illness of immediate family member REQUIRED DOCUMENTATION:

- **Meet with Academic Success Counselor in University College (UCaLL) to obtain an Academic Success Plan.**
- Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.
- If illness of immediate family member: Statement from doctor detailing medical condition incurred by family member. Statement should specifically address medical condition and timeframe for which the condition existed.
- If deceased: Copy of death certificate, funeral program or obituary.

Separation/Divorce REQUIRED DOCUMENTATION:

- **Meet with Academic Success Counselor in University College (UCaLL) to obtain an Academic Success Plan.**
- Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.
- Copy of separation agreement or divorce decree

Work-related difficulties or other extenuating circumstances not listed above. REQUIRED DOCUMENTATION:

- **Meet with Academic Success Counselor in University College (UCaLL) to obtain an Academic Success Plan.**
- Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.
- *If work related: Statement from employer (on company letterhead) explaining work-related difficulties and timeframe for which difficulties existed. The statement should specifically address the following:*
 1. Student's specific work-related difficulties and timeframe for which difficulties existed.
 2. How the work situation has changed to such an extent that it should not significantly impair future academic performance.
- *If other extenuating circumstances: Relevant documentation to support student statement*

Re-admit REQUIRED DOCUMENTATION:

- **Meet with Academic Success Counselor in University College (UCaLL) to obtain an Academic Success Plan.**
- Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.
- Academic plans or conditions of re-admission

Continue to page 3

Please note: All appeals must include the student's statement of appeal. Use the prompt below to craft the statement of appeal. All documentation should include the student's name and relate to the specific period of time during which the student's academic performance failed to meet WSSU's minimum standards for satisfactory academic progress. All 3rd party documents MUST be on letterhead or an official form (i.e. police report/death certificate) and include an official signature.

Paragraph 1 – Provide a clear and detailed description of the circumstances that contributed to your academic problems.

Paragraph 2 – What steps have you taken to resolve the circumstances listed above?.

Paragraph 3 – List the steps you intend to take to improve your academic performance and prevent future issues with academic performance.

By signing this form I certify that I have read the WSSU Satisfactory Academic Progress (SAP) policy and that the information I have provided is accurate and complete. I understand that submission of a SAP appeal does not guarantee reinstatement of aid eligibility. I understand that I am responsible for making necessary payment arrangements for any charges I owe the University regardless of the outcome of my appeal. If I choose not to attend WSSU, I understand it is my responsibility to officially withdraw from my registered classes by the established deadlines. *Lastly, I agree that if I am approved I understand that I must maintain a **2.5 semester GPA for subsequent semesters**.* By signing below, you certify that all information reported is true, correct and complete to the best of your knowledge. Individuals, who purposely provide false or misleading information on this worksheet may be fined, sentenced to prison or both.

Student Signature: _____

Date: _____

FOR OFFICE USE ONLY

Summer _____ Fall _____ Spring _____

Appeal Granted

One time approval

Appeal Denied **Denied Reason:**

- Incomplete Appeal
- Repeated Circumstances
- Time Frame exhausted
- Consistently not met SAP standards
- Poorly Written Appeal

Additional Notes:

FAP Signature _____ **Date** _____