

Student Mailing Address:

## Office of Financial Aid 2020-2021

## **Satisfactory Academic Progress Appeal**

The Office of Financial Aid has established a process to review appeals related to Satisfactory Academic Progress. To have an appeal reviewed, submit a written/typed statement and appropriate documentation to the Office of Financial Aid. The deadline dates to file an appeal are listed below. Appeals received after this date will be reviewed, however, if the appeal is approved, the student will regain eligibility for financial aid beginning the next semester enrolled.

## 2020-2021 deadline dates to file an appeal

Fall 2020 August 19, 2020 Spring 2021 January 6, 2021 Summer 2021 May 26, 2021

To comp	plete an appeal follow ALL steps below:	
1.	Explain in detail the reasons that caused your suspension states. What happened the quarter/semester/year that cause b. What happened the quarter/semester/year that cause	d you to go onto warning?
2.	State how you plan to improve upon past academic performan now be able to successfully complete the classes attempted? result in your appeal being denied.	
3.	Attach third party documentation on company letterhead to clarify/support your appeal such as: statement from academic advisors, faculty, employers, physician, attorney, or clergy, or copies of an obituary, police reports, insurance reports, or court filed documents. The Appeals Committee will not review appeals without sufficient third party documentation. All documentation must be <u>date specific</u> and address the circumstance that occurred during the quarters/semesters/year your academic performance did not meet minimum standards. Failure to substantiate your circumstances WILL result in your appeal being denied for lack of documentation.	
4.	Print and attach your unofficial transcript AND your degree au from My ZSC. With your degree audit, you must also include outline of when each class (semester/year) will be completed	e a written statement from your advisor and a
	In general, the appeal process is not to be used to extend t Therefore, SAP appeals for Maximum Time Fran	- · · · · · · · · · · · · · · · · · · ·
underst appeal fo aid to be	nature attests to the accuracy of all information and docume tand that if my appeal is approved I will be placed on Appeal st for which I am responsible. This letter must be read, signed, d e reinstated. I also understand that if I do not meet the terms of ircumstances.	tatus and sent a letter detailing the terms of my lated, and returned to the office in order for my
Student'	's Name (print):	SSN:
Student'	's Signature:	Date:
Student	Phone: Email Address:	

## **FOR INTERNAL USE ONLY**

Committee Recommendation: \_\_\_\_\_Denied Committee Member: \_\_\_\_\_Approved Comments\_\_\_\_\_ Signature\_\_\_\_\_\_ Date\_\_\_\_\_ Financial Aid Office Representative \_\_\_\_\_Approved \_\_\_\_\_Denied Reasons for Decision: Terms of the Appeal: Financial Aid Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_