

2019-2020 Satisfactory Academic Progress (SAP) Appeal Form

ast Name		First Name	MI	S	WC ID Number
QUALITATIVE st	tandard (cumulate	e grade point averag	ulation that requires financial ge, or GPA) and two QUANTITA not meet all SAP standards wi	TIVE standards	(completion rate/pace and
	Please comple		pletely and clearly, including ete appeals cannot be proces	-	cumentation.
⇒ Step 1	Appeal Terms	and Deadlines			
lease select the	e term you are ap	pealing (check only	ONE):		
			FALL 2019 TERM ONLY		SPRING 2020
	IER 2019 07/25/2019		Deadline 11/1/2019		Deadline 04/10/2020
Deadline > Step 2	07/25/2019 Reason for Ap	peal	Deadline 11/1/2019 for the reason you have been	disqualified for s	
Deadline Step 2 heck your My GPA - F Comple Maxim	Reason for Ap Reason for Ap Financial Aid Acco Failure to maintai etion Rate/Pace - hum Time Frame -	peal ount in WebAdvisor n the minimum 2.00 - Completed less tha - Exceeded 150% of	for the reason you have been) GPA requirement. In 67% of the courses in which the minimum required units t	student was en	SAP and must appeal rolled.
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• SEP must be dated within the past 12 months, with no more than two updates.

- Ensure that your declared program of study on your SEP is the same one listed on your WebAdvisor account.
- You must also only be taking classes listed on your SEP and being required to complete your declared program.
- This must be attached to your appeal packet.

SWC ID Number _____

\Rightarrow Step 5 Explanation of special circumstances

DOCUMENTATION REQUESTED

Special circumstances are unanticipated events that impact academic performance. Provide the following information and attach supporting documentation verifying the special circumstance you wish to be considered in your appeal. To ensure that your appeal will be given every consideration and opportunity for approval, be as thorough as possible and explain your circumstances in detail. If extra space is needed, you may attach additional sheets.

INCLUSION OF DOCUMENTATION OF SPECIAL CIRCUMSTANCES IS STRONGLY RECOMMENDED!

1. Describe the special circumstance that prevented you from making SAP. Explain what happened and how it impacted your academic performance and ability to meet SAP standards.

2. Explain what has changed in your situation that will now allow you to make SAP at the next evaluation, including steps you have taken to be successful academically.

\Rightarrow Step 6 APPEAL CHECKLIST

Completed appeal form		Documentation of special circumstances
Online SAP workshop confirmation		Comprehensive Student Education Plan
Semester by Semester Completion Plan (if SA	P disqualified	for Maximum Timeframe)

Student Certification

Please initial below to certify:

	All statements and supporting	g documentation are true and	I correct to the best of my knowledge.
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- I understand that if my appeal is approved, I must fulfill all conditions of my Academic Plan. I also understand that my record will be evaluated at the end of each to determine compliance with Academic Plan requirements and that disbursement of future aid may be delayed during that process. If I do not fulfill the conditions, I cannot receive aid for future terms until I regain satisfactory academic standing.
- _____ I understand that processing of my appeal will take 2-4 weeks.
- I understand that all information provided on this appeal is considered confidential. However, all Financial Aid employees are considered Responsible Employees and are mandated to report any incidents of sexual harassment, discrimination, assault, or abuse to the Title IX Administrator. Questions or concerns should be directed to the Title IX Officer.

Last Name	
SWC ID Number	

SEMESTER BY SEMESTER COMPLETION PLAN—Students Disqualified for Maximum Timeframe ONLY

If you have been disqualified for Maximum Timeframe, you are required to complete this worksheet listing the specific courses that you have remaining to complete your degree. <u>WE STRONGLY SUGGEST</u> that you work directly with your counselor on this, since you will be expected to follow your plan <u>exactly</u> if your appeal is approved.

You may lose your eligibility to continue to receive aid if there is any variation in your enrollment pattern.

Expected Date of Graduation/End of Academic Plan:	Program of Study:

Term: _____

Term: _____

Course Name	Units

Course Name	Units

Term: _____

Term: _____

Units	Course Name	Units
	-	
	Units	Units Course Name