



*Florida State*  
University

**SATISFACTORY ACADEMIC**  
**PROGRESS APPEAL**

Semester	Submit Appeal By:	For review by:	Last day to submit:
Fall 2019	8/2/2019	Fall Tuition Deadline	10/11/2019
Spring 2020	1/7/2020	Spring End of Term	2/22/2020

Undergraduates can only use this appeal form if coming into FSU with a large number of transfer credits.

**Credit Hour Recalculation**

If you believe the credit hours used in the Satisfactory Academic Progress review should be re-evaluated, you may have your Academic Advisor complete this form to establish current degree hours attempted / earned and or GPA recalculation.

- If you are completing more than one major, both Academic Departments must complete.
- If your credit hours /GPA are correct – you need to refer to the standard Satisfactory Academic Appeal form.

**SECTION I: General Information (to be completed by the student)**

Name \_\_\_\_\_ EMPLID \_\_\_\_\_

Please Print (First – Last)

**Career (Circle):** UGRD GRAD LAW MED

Major: \_\_\_\_\_

Phone: \_\_\_\_\_ Expected Grad Date: \_\_\_\_\_

**SECTION II: Statement of Appeal (to be completed by the student)**

I am appealing cancellation of my financial aid for the following reasons: (check all that apply):

- ☐ Cumulative (including transfer) GPA is less than 2.0  
☐ Did not successfully complete 70% of attempted hours  
☐ Exceeded the maximum attempted hours for degree completion

Florida State University's Use of Social Security Number policy is available at [http://registrar.fsu.edu/bulletin/undergraduate/information/university\\_notices/](http://registrar.fsu.edu/bulletin/undergraduate/information/university_notices/)

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[www.financialaid.fsu.edu](http://www.financialaid.fsu.edu)

Revised 3/5/2019

**SECTION III: Transcript Review****Academic Advisor/Dean's Office: to be completed by the Academic Advisor, Department Head, or Dean**

We are requesting your assistance in assessing the student's academic record. Please review the student's transcript to document the following:

- Hours required for the current degree being sought
- Hours attempted toward the current degree
- Hours earned toward the current degree
- GPA for the current degree

The student is working towards the following degree:

BA/BS/BFA \_\_\_\_\_ MA/MS \_\_\_\_\_ SPECIALIST \_\_\_\_\_ Ph.D. \_\_\_\_\_

J.D. (LAW) \_\_\_\_\_ M.D. (MED) \_\_\_\_\_ Major: \_\_\_\_\_

(1) Has the student completed all required courses for the degree being sought? \_\_\_\_ Yes \_\_\_\_ No

(2) Average Credit Hours required for current degree program being sought \_\_\_\_\_

(3) Student's Attempted Hours towards current degree program \_\_\_\_\_

(4) Student's Earned Hours towards current degree program \_\_\_\_\_

\*If transfer hours are included in the total Earned hours, please indicate the total Transfer hours applicable to the degree.\*

Total Hours Earned: \_\_\_\_\_ Transfer Hours Toward Degree: \_\_\_\_\_

(5) Is the student working on more than one degree concurrently? \_\_\_\_ Yes \_\_\_\_ No

(6) Remaining credit hours needed to complete degree program(s) requirements \_\_\_\_\_

**(MAJOR AND ANY REQUIRED MINOR - including current term):**

(7) Timeframe for completion of degree(s) (expected graduation): Term: \_\_\_\_\_ Year: \_\_\_\_\_

**Academic Advisor/Dean's Office:**

Signature (Academic Advisor/Department Head/Dean): \_\_\_\_\_

Print Name: \_\_\_\_\_ Title/Department: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_