



FLORIDA STATE UNIVERSITY
Office of Financial Aid

Name: _____

EMPLID: _____

Date: _____

**2020–2021 Satisfactory Academic Progress Appeal
Credit Hour Recalculation**

Term	Priority Date to Submit	Final Deadline to Submit:
Fall 2020	July 17, 2020	October 15, 2020
Spring 2021	November 20, 2020	February 12, 2021
Summer 2021	March 26, 2021	June 18, 2021

If you believe the credit hours used in the Satisfactory Academic Progress review should be re-evaluated due to high transfer hours or a second degree (undergraduate or graduate), 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 the form.
- If your credit hours /GPA are correct, you will need to refer to the standard Satisfactory Academic Appeal form to appeal based on extenuating circumstance.

SECTION I—General Information (to be complete by student)

Name: _____ EMPLID: _____

Please Print (First/Last)

Career: UGRD GRAD LAW MED Major: _____

Phone: _____ Expected Grad Date: _____

SECTION II—Statement of Appeal (to be complete by 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 for undergraduate or 3.0 for graduate

Did not successfully complete 67% of attempted hours

Exceeded the maximum attempted hours for degree completion

SECTION III—Transcript Review (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: _____

NOTE: 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:

I certify that I have spoken with the student in regards to his/her academic plan and provided the student with access to a copy of the completed plan.

Signature (Academic Advisor/Department Head/Dean)

Print Name

Title/Department

Phone Number

Email

Florida State University's Use of Social Security Number policy is available at
http://registrar.fsu.edu/bulletin/undergraduate/information/university_notices/
282 Champions Way | P.O. Box 3062430 | University Center A4400 | Tallahassee, FL 32306
Phone: 850-644-0539 | Fax: 850-644-6404 | Email: OFACS@fsu.edu
www.financialaid.fsu.edu