



FLORIDA STATE UNIVERSITY  
Office of Financial Aid

Name: \_\_\_\_\_

EMPLID: \_\_\_\_\_

Date: \_\_\_\_\_

## 2020–2021 Satisfactory Academic Progress Appeal Instructions for Circumstance-Based Appeal

1. Read all of these instructions; fill out the form completely; and sign and date the appeal.
2. To appeal the denial of your continued financial aid eligibility, which resulted from not complying with the Satisfactory Academic Progress standards, you must complete a Satisfactory Academic Progress (SAP) Appeal and submit ALL required supporting documentation. For more information about Florida State University's academic progress requirements to receive financial aid, please see: <http://financialaid.fsu.edu/Resources/Satisfactory-Academic-Progress-Policy>.

**Appeals submitted without all required documentation are regarded as incomplete and will be denied.**

The following must be submitted as part of the appeal:

- An explanation of the extenuating circumstances that led to you not meeting the standards for Satisfactory Academic Progress. Your written statement must include a description of the problem/incident, indicating the dates and time periods involved, as well as the impact on your academic performance.
- An explanation of what has or will change that will now allow you to meet the standards for Satisfactory Academic Progress.
- An academic plan completed by an academic advisor. The plan must include course work to raise your GPA, and increase the course completion ratio to 67%, and/or meet degree completion requirements. **NOTE:** Course work listed on the plan must be required for completion of your degree. **If you have more than one major we require academic plans from both academic departments.**

**NOTE:** Failure to corroborate your circumstance may result in your appeal being denied for lack of documentation.

3. Submit the completed appeal with all supporting documentation to the Florida State University, Office of Financial Aid, 228 Stadium Dr. UCA 4400 Tallahassee, FL 32301-2430. You may also email your materials to **EMT-FA-SAP@fsu.edu**.

**IMPORTANT:** Late-appeal submissions are subject to federal regulations regarding the awarding and/or disbursement of financial aid funds.

Example Reasons for Submitting an SAP Petition	Examples of Support Documentation (not inclusive):
Personal illness or injury (including medical withdrawal)	<ol style="list-style-type: none"> <li>1. A detailed explanation of the medical circumstances including the date of occurrence, duration, and how it negatively affected your coursework.</li> <li>2. Support documentation (i.e. medical withdrawal, physician's statement, copy of police report, medical documentation).</li> <li>3. Support documentation regarding what steps you've taken to successfully move forward (i.e. statement from a physician, DSO, academic advisor, or 3rd party agency that assisted you during your illness or injury).</li> </ol>
Illness of a family member	<ol style="list-style-type: none"> <li>1. A detailed explanation of the medical circumstances of the family member, including the name and relationship of the family member to you, the date(s) of occurrence(s), duration, and how it negatively affected your coursework.</li> <li>2. Support documentation (i.e. physician's statement, medical documentation).</li> <li>3. Support documentation regarding what steps you've taken that will allow you to successfully move forward (i.e. physician's statement, academic advisor, 3rd party agency).</li> </ol>
Death of a family member/ roommate/close friend	<ol style="list-style-type: none"> <li>1. A detailed statement including the name of the deceased and his/her relationship to you with an explanation of how this event negatively affected your coursework.</li> <li>2. Support documentation (i.e. copy of the obituary, notice of the funeral, or death certificate).</li> <li>3. Support documentation that demonstrates your ability to return to classes and successfully complete your course load (i.e. statement from academic advisor, letter of support from Counseling and Wellness Services, physician statement).</li> </ol>
Personal Crisis	<ol style="list-style-type: none"> <li>1. A detailed explanation of the crisis including the date of occurrence, duration, and how it negatively affected your coursework.</li> <li>2. Support documentation (i.e. physician's statement, copy of police report, Personal Protection Order, medical documentation, Victim's Advocacy memo)</li> <li>3. Support documentation regarding what steps you've taken to resolve the crisis and successfully move forward (i.e. physician's statement, academic advisor, 3rd party agency that assisted you with resolving this crisis).</li> </ol>
Other Circumstances	<ol style="list-style-type: none"> <li>1. A detailed explanation of the circumstances and how they negatively impacted your academic progress.</li> <li>2. Support documentation substantiating your circumstances.</li> <li>3. Support documentation supporting that your circumstances have been either been resolved or are being managed.</li> <li>4. A prescribed academic plan of work from an academic adviser outlining what courses and/ or course load you will enroll in that will aid you in meeting the AP standards.</li> </ol>
Exceeded Maximum Credit Hours for Degree Completion	<ol style="list-style-type: none"> <li>1. A detailed explanation of the circumstances that resulted in your exceeding the maximum hours required to obtain a degree in your program of study.</li> <li>2. A prescribed academic plan of work from an academic adviser outlining your remaining degree requirements and projected completion date.</li> </ol>
<p><b>NOTE:</b> Appeals submitted for reasons above will be reviewed on a case-by-case basis. Appeals are not automatically approved for any of the above reasons but are reviewed based on documented circumstances, academic history, and projection of potential for academic success.</p>	

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

## Satisfactory Academic Progress Appeal Form

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

### 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

#### **Second Appeal**

Did not comply with the prescribed Academic Plan requirements

Additional Circumstances/Documentation not previously provided



### SECTION IV, Part 1—Academic Plan (both pages to be completed by the Academic Advisor, Department Head, or Dean)

*This student is currently not eligible for financial aid for one or more of the reasons listed below.*

We are requesting your assistance in assessing the student's academic record. Please develop the Academic Plan in consultation with the student. Be as specific as possible, and include any required or restricted courses and any restrictions on full-time enrollment.

The Student should indicate which criteria are being identified as the Satisfactory Progress Hold, available via the SAP email notification to student.

Student's Cumulative GPA is less than 2.0

1. Provide a plan of work (courses and course load) in which the student is advised to enroll in order to raise cumulative GPA to at least 2.0.
2. Please include in the comments section (if appropriate) the grades and/or length of time it will require for the GPA to reach at least 2.0.

Student did not successfully complete 67% of attempted hours

Student exceeded the maximum number of attempted hours (180 hours undergraduate/Second Degree) for degree completion. Please see the SAP policy at <http://financialaid.fsu.edu/Resources/Satisfactory-Academic-Progress-Policy> for the maximum number of graduate hours.

### SECTION IV, Part 2—Academic History

	Yes	No
1. Has the student completed all required courses for a bachelor's/master's/doctoral degree?		
2. If student has declared minor, is it required for the degree? Student has not declared a minor.		
3. Remaining credit hours needed to complete degree program requirements—major and any required minor, including current term): _____		
4. Timeframe for degree completion (expected graduation): Term _____ Year _____		
5. Is the student seeking a double major?		
6. If yes, please complete a separate Academic Plan for each major.		

### SECTION IV, Part 3—Academic Plan, cont.

- Please provide detail for the Academic Plan: list course work recommended to raise GPA, increase course completion ration to 67%, and/or meet completion requirements. List Minor courses only if they are required for a major.
- If a minimum grade is required for course credit towards degree, please indicate that.

### NOTES

- Full time enrollment (12 credits minimum/term undergraduate) is expected, but less-than-full-time may be recommended if necessary for the student's academic success (due to circumstances, i.e., family/health/work)
- Students must be enrolled at least half-time (6 credit hours minimum/term) to be eligible for financial aid disbursement, but financial aid may only be awarded/disbursed for courses required for the degree being sought.

Student's Name

EMPLID

Prefix Course #	Required?		Credit Hours per Class	Term		Prefix Course #	Required?		Credit Hours per Class	Term
	Yes	No					Yes	No		

**Student:**

I, \_\_\_\_\_ attest that all information provided is true and complete, and I agree to and understand that I must abide by the Academic Plan (Part 1 & Part 2) set up by my academic advisor. I also understand that if I do not abide by the plan, I will lose eligibility for financial aid.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**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