

UNG ID # 900	
2014-2015	SAP2

SAP Appeal Form #2 – Extenuating Circumstances For Financial Aid Reinstatement

heck the reasor I suffered from O Attach a occurrence	Select Semester for Appeal Fall Semester Spring Semester Summer Semester Summer Semester summer Semester	Final Deadline for Semester November 1 April 1 July 1 ntain Satisfactory Academic Program of the semester.	
I suffered from o Attach a occurrence	☐ Fall Semester ☐ Spring Semester ☐ Summer Semester ☐ Summer Semester ☐ (s) you were unable to main a severe illness or injury during	November 1 April 1 July 1 ntain Satisfactory Academic Pro	
I suffered from o Attach a occurrence	☐ Spring Semester ☐ Summer Semester n(s) you were unable to main a severe illness or injury during	April 1 July 1 ntain Satisfactory Academic Pro	
I suffered from o Attach a occurrence	Summer Semester n(s) you were unable to main a severe illness or injury during	July 1 ntain Satisfactory Academic Pro	C-1000
I suffered from o Attach a occurrence	a severe illness or injury during	ntain Satisfactory Academic Pro	
I suffered from o Attach a occurrence	a severe illness or injury during	•	
o Attach a occurrence		g the semester.	gress.
o Attach a occurrence			
T 1 1 1 1	statement from physician re/treatment.	or mental health professional	reflecting date(s) of
	lative die during the semester. Copy of Death Certificate or C	Obituary.	
Other:			
o Attach a C	Copy of Documentation that s	upports the claim.	
ompose a TYP	ED and SIGNED appeal let	ter to request a reinstatement of	f financial aid.
		_	
	0		Committee
	0 1 1 1 (7)	•	e
			will allow you to make
gning this form o	certifies that all the information	n reported on it is complete and co	orrect.
Student's Sign	ature	 Date	
nit this complete	ed form, your appeal letter and	required documents to the UNG	Financial Aid Office.
1	77 11		
	O Attach a G I have reached to Attach a I Other: O Attach a I Other: Type your UNG Address the lett In the first para In the final para tisfactory Acade gn the appeal I gning this form Student's Sign	O Attach a Copy of Documentation that s I have reached the maximum length of study o Attach a Plan of Study completed by the Other: O Attach a Copy of Documentation that s compose a TYPED and SIGNED appeal let Type your UNG ID # in the upper right hand Address the letter to The Financial Aid Satisfa In the first paragraph, explain the reason(s) you In the final paragraph, explain what has change tisfactory Academic Progress by the end of the gen the appeal letter and this form. In the single state of the service of the serv	I have reached the maximum length of study limit. Attach a Plan of Study completed by the advisor listed on your Tranguid. Other: Attach a Copy of Documentation that supports the claim. Type your UNG ID # in the upper right hand corner of the letter. Address the letter to The Financial Aid Satisfactory Academic Progress Appeal In the first paragraph, explain the reason(s) you failed to make Satisfactory Academic Progress by the end of the semester. In the final paragraph, explain what has changed in your particular situation that tisfactory Academic Progress by the end of the semester. In the appeal letter and this form. In the appeal letter and this form. In the final paragraph this form certifies that all the information reported on it is complete and

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Financial Aid Call Center: 706.864.1412 Email: finaid@ung.edu