

Office of Academic Transformation and Success
 B-2032K

Program Pursuit Appeal – Title IV Funds

Last Name _____

First Name _____

Student ID number XXX – XX - _____

Street Address _____

City _____ State _____ Zip code _____

Type of Financial Aid that will be affected: Federal Work Study, Loan(s), PELL, SEOG

*** Reason for Academic Performance (Check all that apply)**

_____ Death in Immediate Family (death certificate required)

_____ Natural Disaster

_____ Illness (medical documents required)

_____ Other

_____ Loss of Employment (notice from HR officer required)

*** Appeal requests must include the following information:**

1. Fill out back of this form or attach a type written petition.
2. Explain what occurred that resulted in you not meeting Student Academic Progress (SAP) requirements?
3. Explain what has changed to ensure you will meet SAP requirements next semester?
4. Petitions are to be returned to B-2032K; attn.: Ms. Shannon Clarke-Anderson

*****FOR OFFICE USE ONLY*****

Appeal Decision

_____ Approved

_____ Denied

Required courses: _____

_____ Student Notified

Rationale _____

Minimum Credits to gain SAP _____

Semester(s) _____

Date Processed _____	Initials _____
----------------------	----------------

PETITION FORM

1. What occurred that resulted in your not meeting Student Academic Progress (SAP) requirements. Please explain below.

2. What has changed to ensure that you will meet SAP requirement next semester?

3. Is there anything else you'd like us to know?

Check here if additional documentation is attached
(i.e. medical documents, death certificate, loss of employment letter, etc.)

Signature _____

Date _____