Unsatisfactory Academic Progress Appeal

Student Name:	Student ID:	Phone #:	
the Satisfactory Academic Pro order for the student to reg	ogress (SAP) Standards Policy. Ap	tus, you must complete this form to request an exception opeals should be received by week 5 of the semester in the current semester of enrollment. Submission deadlined /sap.	ı
Please follow the steps below	when submitting an appeal.		
Step 1: Reason for Appeal –	mark all that apply Pace of Completion Rate (67	7%)	
your control prevented circumstances. Exter • Medical condition • Death of an immel • Change in condition • Involuntary call to the condition of the condition	rped and signed, personal statement ed you from meeting the SAP required in a serious illness ediate family member fons of employment to active military duty ocumentation to support the claim	ims made in your personal statement Indicating the dates you were under their care	
Accident reports,Letter of explana	police reports, court records, etc tion from employer on letterhead	c.	
SAP requirement time frame defici	s within a specific period of time (your academic advisor that ensures you will meet the (not to exceed two semesters) for GPA or maximum ire an academic plan submission	
	l appeal form, letter and supporti	I: <u>finaid@saintleo.edu</u> or Fax: (866) 708-7770 ing documents	
Notifications are sent via emai appeal.	l to the student Saint Leo email ac	address within 30 days of the university receiving a comple	ete
documentation are accurate, tru Financial Aid Office. I realize tha above are complete and until I si information may be cause for the	e, and complete to the best of my kn t a final decision made not be made oub ubmit any additional information if re	nic Progress Appeal, my written appeal, and any supporting nowledge. I will provide other information as requested by SLU on my Satisfactory Academic Progress Appeal unless all steps equested by SLU Financial Aid Office. I understand any false nt of student financial assistance and may subject me to a fine,	

Student Signature ______Date _____