

If you have received a SAP Suspension letter, you may appeal for reconsideration. Please read and follow the instructions on how to complete the appeal.

Part I: Letter of Explanation

1. Write a detailed explanation of your extenuating circumstances that prevented you from meeting the Satisfactory Academic Progress (SAP) Standards.
2. Write a plan of action indicating how you have changed your circumstance or resolved the issue which prevented you from meeting SAP. Explain how it will not be a future issue.
3. Attach copies of supporting documentation (if applicable). For example: doctor's letter, death certificate, police reports, or court documents. (A general letter from the doctor that injury or illness hindered academic performance is an acceptable document. A release to speak to the doctor directly is also acceptable.)

Part II: Submit an Academic Plan

Schedule an appointment with a representative from your department/program (academic advisor, faculty, etc.) to complete the Academic Plan in the SAP appeal. The representative will have to complete the bottom portion of the Academic Plan, answering all questions regarding academic status and confirming their approval of the plan.

Part III: Life Skills Lessons

Complete any 2 financial literacy lessons online from Life Skills. The link is available at www.apu.edu/graduatecenter/sfs/financialaid/loans/managedebt. Life Skills log in instructions is available online.

School Code: 00111700

Student Access Code: 00111700-01

APU will automatically receive notification when you have successfully completed your lessons.

APPEAL PROCESS

Your appeal will be reviewed within 2 weeks of submission. You will be notified by mail of our final decision.

The following are considered during the review:

- Your extenuating circumstance that prevented you from successfully meeting SAP.
- Demonstrated solution to the non-recurring issue.
- Ability to complete your degree as stated on your academic plan within the maximum time frame.
- Department/Program representative's comments and recommendations.
- Supporting documentation as it relates to your extenuating circumstance.

*Note: If you feel that you have received a SAP Suspension notice in error, please submit a letter or e-mail of explanation and supporting documentation if applicable (ie. Grade change, repeated class GPA re-calculation).

MAILING ADDRESS

AZUSA PACIFIC UNIVERSITY • GRADUATE CENTER: SFS • P.O. BOX 7000 • AZUSA, CA • 91702-7002
Phone (626) 815-4570 • Fax (626) 815-4545



Graduate Student Financial Services
Satisfactory Academic
Progress Appeal

SAP
2013-2014

Please complete all fields on this form using a black or blue pen. Incomplete forms will be returned and will cause a delay in review. There are 2 pages to this appeal.

APU ID#: [] Academic Program: []

Name: [] [] []
Last First M.I.

SAP Appeal Terms: [] Fall [] Spring [] Summer Have you appealed before for SAP? [] Yes [] No

REASON FOR SAP APPEAL (PLEASE REFER TO "AID SUSPENSION LETTER")
[] Low GPA [] Insufficient Units Completion [] Duration (maximum time frame reached)

*The appeal must be received by our office within 30 days of your receiving the financial aid suspension notification.

1. Please provide a detailed explanation of the special circumstance that has prevented you from meeting the Satisfactory Academic Progress for GPA and/or unit completion requirement. Attach supporting documentation and/or additional pages for explanation:

[Empty box for detailed explanation]

2. Please describe what has now changed in your circumstances that will enable you to be successful academically. Also explain what steps you will take to meet Satisfactory Academic Progress in the future:

[Empty box for description of changed circumstances]

Student Signature _____ Date ____/____/____

*On the back (2nd page), submit an academic plan that will demonstrate your plan to meet SAP.

Financial Aid Office Review: DECISION: [] Approved [] Denied

Comments: _____

Management Staff Signature(s): _____ Date: ____/____/____



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**SAP
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Please complete all fields on this form using a black or blue pen. Incomplete forms will be returned and will cause a delay in review. There are 2 pages to this appeal.

APU ID#: Academic Program:
 Name:
Last First M.I.

Anticipated Graduation Date for your program (MM/YY):

***Please consult with your Program Academic Advisor to create an academic plan that will demonstrate successful progress toward meeting Satisfactory Academic Progress (SAP) by the end of your program or this year (whichever is earliest). Please indicate minimum GPA and units needed per session to meet SAP. For more details, refer to the SAP policy and requirements at www.apu.edu/graduatecenter/sfs/financialaid/policies/**

<i>(Example)Term/ Session: Fall I ~ 2013</i> <i>Course 101 – 3 units</i> <i>Course 104 – 1 unit</i> <i>Course 205 – 5 units</i> <i>Units: 9 units</i> <i>Minimum GPA needed: 3.2</i>	1st Term/Session: _____	2nd Term/Session: _____
	Course: _____	Course: _____
	Course: _____	Course: _____
	Course: _____	Course: _____
	Units: _____	Units: _____
Minimum GPA: _____	Minimum GPA: _____	

3rd Term/Session: _____	4th Term/Session: _____	5th Term/Session: _____
Course: _____	Course: _____	Course: _____
Course: _____	Course: _____	Course: _____
Course: _____	Course: _____	Course: _____
Units: _____	Units: _____	Units: _____
Minimum GPA: _____	Minimum GPA: _____	Minimum GPA: _____

To be completed by a member of your academic advising staff or a representative of your academic dept:

1. Is the student on academic probation? YES NO 2. Retaking courses? YES NO

Additional terms of plan or comments (Example- Must obtain cumulative GPA of 3.5 each term to raise to 3.0 GPA; Must complete 6 units each term as stated on academic plan; Retaking course 101 in Spring, etc.):

Reviewed by (Print Name and Title):

Contact information (or attach business card) Email: Phone:

Signature: _____ Date: ____/____/____

I certify that this academic plan was reviewed and approved to meet Satisfactory Academic Progress requirements.