



20__-20__ Satisfactory Academic Progress (SAP) Appeal

Student Name: _____
(Please print)

SCU ID: _____

In order to be reconsidered for financial aid, students who are not meeting the U.S. Department of Education's Satisfactory Academic Progress (SAP) regulations at Santa Clara University must submit an appeal with all necessary documentation. To view the U.S. Department of Education's SAP regulations, visit our website: <https://law.scu.edu/financialaid/aid-eligibility/>

If you decide to complete the SAP appeal form, please submit it as soon as possible so that the SAP committee can review it promptly. It's important for students to keep their student account in good standing during this process. Take any necessary action immediately to avoid unnecessary delays. SAP appeals will not be considered for the current term of enrollment if not submitted within 5 weeks after the start date of the term.

Appeal should include all of the following:

- 1) An attached statement describing the specific reason(s) beyond your control (events and/or circumstances) that directly contributed to the lack of meeting the satisfactory academic progress requirements. Specific dates of the events (in case of illness, accidents, etc.) should be included. If the reasons for lack of meeting the academic requirements developed over the course of several terms (or academic years), you should explain all circumstances that have contributed to not meeting the minimum requirements.
- 2) Documentation to support your appeal (e.g. medical billing statement as proof of illness, etc).
- 3) Signature by academic advisor/faculty mentor confirming a discussion of a plan of corrective action has taken place (see below).
- 4) Copy of corrective action plan

Please list the documents you have attached to support your appeal:

- 1) _____
- 2) _____
- 3) _____

For Academic Advisor to complete:

_____ The student and I have developed and reviewed his/her academic plan.

I have met with (Name of student) _____ and we have discussed a plan for corrective action regarding her/his academic progress. The written plan is on file in the student's advisement file.

Advisor Name (please print) _____ Title _____

Signature _____ Date ____/____/____

Certification Statement:

All of the information provided by me or any other person on this form is accurate and complete to the best of my knowledge. If requested, we agree to give proof of the information we have provided on this form.

Student Signature (Typed and digital signatures are not acceptable)

Date

*Please scan completed form and send to lawfinancialaid@scu.edu