



# Satisfactory Academic Progress Appeal Form

Name: \_\_\_\_\_

Student Id #: \_\_\_\_\_

Student Email Address: \_\_\_\_\_@student.coastalalabama.edu

Student Degree: \_\_\_\_\_

Semester and year for which you are applying for reinstatement of aid:  Fall  Spring  Summer Year: \_\_\_\_\_

Federal regulations require students to maintain Satisfactory Academic Progress (SAP) in three areas – cumulative GPA, hours earned/completion percentage, and maximum time limit – to be eligible for federal financial aid. Please review our complete SAP policy at [http://www.coastalalabama.edu/financialaid/financial\\_aid\\_policies/](http://www.coastalalabama.edu/financialaid/financial_aid_policies/).

Submission of a SAP appeal form does not guarantee reinstatement of Financial Aid Eligibility.

- Students will be notified via Coastal Alabama student e-mail regarding a decision. \*Please note: results **may** take up to **7-10 business days** and **all** decisions made are **final**.
- SAP appeal decisions are not guaranteed to be completed by the Payment Deadline: therefore students must pay out of pocket and get reimbursed – **based on eligibility** – once a decision has been made and financial aid is awarded.
- It is the student's responsibility to stay informed of the SAP standards and to monitor his/her own progress on his/her OneACCS student portal.

**\*\*\*INSTRUCTIONS\*\*\* (steps 1-3 are required, if you have not followed each step properly the appeal will not be reviewed)**

1. Please attach a **TYPED and SIGNED (BLACK INK ONLY)** explanation of unusual circumstances associated with **unsatisfactory academic progress** or how you have obtained **maximum credit hours** with no degree.
2. In a separate paragraph, please explain what changes have occurred that will enable you to meet Financial Aid Satisfactory Academic Progress requirements (**academic tutoring, counseling, etc.**). You must state what you are going to do differently academically to ensure academic success. (**meet with advisor, use resource facilities, etc.**)
3. **Must complete a current FAFSA for the academic year you are appealing for before submitting your appeal**

### REINSTATEMENT REQUEST

Please indicate, with a check mark, which situation applies to your academic situation:

- GPA lower than required** - You must provide supporting documentation from a 3<sup>rd</sup> party, professional source, on letter head, to support your unusual or mitigating circumstance that prevented your from maintaining **Satisfactory Academic Progress**
- Rate of completion lower than required** - You must provide supporting documentation from a 3<sup>rd</sup> party, professional source, on letter head, to support your unusual or mitigating circumstance that prevented your from maintaining **Satisfactory Academic Progress**
- Maximum time without a degree earned** - You must meet with an academic advisor from your program of study to obtain an academic plan detailing the courses you will take to complete your current degree. Your academic plan must be physically signed by you and your advisor. (**plan must be course, credit and term specific**)

### APPEAL RESULTS & STUDENT ACKNOWLEDGMENTS – PLEASE READ AND SIGN

If my appeal is **DENIED**, by signing below I understand that decisions are processed on a case-by-case basis and the director may deny any SAP appeal. I understand the decision is final.

If my appeal is **APPROVED**, by signing below I understand that I must follow **ALL** requirements and only register for the classes included in my Academic Plan. Additional courses or program changes are not allowed during this timeframe without prior approval.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<b>For Office Use Only:</b>	
Date Received: _____	FAA Initials: _____
Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Comments: _____	
_____	
_____	

Please note that processing may take 7-10 business days after documents are received. Processing time may be longer during peak processing times.

MAIL, FAX, OR EMAIL THIS FORM USING THE INFO BELOW...

Coastal Alabama Community College  
 Financial Aid  
 1900 Highway 31 South  
 Bay Minette, AL 36507  
 FAX: 251-580-2182  
 EMAIL: [financial\\_aid@coastalalabama.edu](mailto:financial_aid@coastalalabama.edu)