



## Satisfactory Academic Progress (SAP) Appeal Form

Student Name: \_\_\_\_\_ CFCC ID # : \_\_\_\_\_ ( Required)

Phone Number :(\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

I wish to meet with the committee: YES \_\_\_\_\_ NO \_\_\_\_\_

**Attach the following documents to this Appeal Form and place check mark by what is attached.**

\_\_\_\_ 1: A Typed statement explaining:

- Extenuating circumstances that led to the suspension of your financial aid
- What has changed to improve your situation moving forward?
- If this is for timeframe give the reasons for changing your program of study (or pursuing second degree)

\_\_\_\_ 2: A copy of your CFCC program evaluation to document the courses needed to complete your new academic program and the courses that you have already completed.

\_\_\_\_ 3: Please supply any and all documentation that will support your request for the appeal. Including, but not limited to:

- Proof of extenuating circumstances outlined in your appeal letter
- Proof of your improved situation moving forward

**Please Note:** Appeals submitted without adequate documentation will **not** be processed

### For Time Frame Appeals Only:

How many semesters do you need to graduate? \_\_\_\_\_

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

----- For Office Use Only -----

Completion Rate: \_\_\_\_\_ GPA: \_\_\_\_\_ Timeframe \_\_\_\_\_