



Satisfactory Academic Progress (SAP) Appeal

The Office of Student Financial Aid and Scholarships (OSFAS) has established an appeal process and a committee to review all financial aid appeals related to Satisfactory Academic Progress (SAP). Any student who wishes to appeal his/her ineligible status for financial aid due to SAP should read and complete the attached materials.

DEADLINE: An appeal form with all appropriate documentation must be submitted no later than the **21st day of classes** of the quarter for which student financial aid is being requested (contact the OSFAS for specific dates). Appeals that are submitted after the 21st day of classes will be held for the next quarter.

PROCEDURE: In order to submit an appeal, you must:

- Schedule an appointment to meet with your academic advisor or dean's office representative to discuss your appeal and to obtain the required advisor's statement and signature **before** submitting your appeal. Without the required advisor's information, the appeal will not be reviewed and will be returned to the student.
- Complete appropriate items on both sides of the appeal form. Attach documentation to clarify/support your appeal. If you are unsure of which items to complete or what documentation is required, please contact the OSFAS.
- Submit your appeal to the OSFAS at the address or fax number provided above. All appellants will receive a written response as soon as possible, but no later than 10 business days after submitting all necessary information.

GUIDELINES for appealing:

- Be specific when explaining your circumstances. Lack of information or documentation will result in a delay of an appeal review, or may result in a denial of your appeal. If problems in your physical or mental health have played a role in your circumstances, please attach supporting documentation from a doctor, counselor, or hospital.
- The appeal committee assumes that each student appealing is dependent upon financial aid for the completion of his/her degree. **Please do not discuss your need for financial aid in your appeal.**
- If you are unclear as to why you no longer meet satisfactory academic progress standards for financial aid, or if you have questions about completing the appeal form, please contact the OSFAS.

NOTE: If you have been suspended from your college, this appeal will not result in an academic reinstatement. A separate appeal process is necessary. Please contact the office of your college's dean for more information on reinstatement to your program of study.

Please complete all appropriate items on the entire appeal form. Incomplete appeals will not be reviewed and will be returned to the student. This document is four pages in length.

To be completed by Student

Appeal results will be sent to the address you provide below.

Name _____ PID _____

Street Address _____

City, State, Zip Code _____

Phone Number _____ Email _____

Last quarter of attendance at Ohio University _____

Ask your faculty advisor, dean, or administrative staff member who is aware of your situation to complete the appropriate statement below and provide comments relevant to this appeal. This appeal will not be considered if the following section has not been completed.

To be completed by Advisor

This information will be placed in the student's financial aid file and will be available for review by the student.

I support this appeal because:

Please outline future steps the student will take to ensure satisfactory academic progress:

Please print or type the following information:

Faculty/Staff Name _____

Title _____

Department _____

Campus Address _____

Campus Phone Number _____

Faculty/Staff Signature _____ Date _____

To be completed by Student

I. For which quarter(s) are you requesting reinstatement? Please circle all that apply.

Summer

Fall

Winter

Spring

II. If you have failed to maintain a satisfactory grade point average and/or meet the minimum credit hour requirement, please answer the following questions. Be specific and concise in your explanation and focus your attention on the academic quarters in which you did not meet the requirements for satisfactory academic progress. Responses should be typed on a separate sheet of paper and attached to this form.

1. Explain in detail the nature of your difficulty. Indicate reasons such as academic, medical, emotional, etc. Include all appropriate information and documentation.

2. State why you believe it is possible for you to improve upon your past academic performance and what corrective action have you taken.

III. If you have failed to complete your degree within the allotted time frame, please answer the following questions. Be specific and concise in your explanation. Responses should be typed on a separate sheet of paper and attached to this form.

1. Why has it taken more than the allotted time to complete your degree?

2. When do you expect to graduate? (Please provide quarter and academic year.)

3. Complete the "Timetable of Remaining Coursework" form including advisor's signature.

IV. I CERTIFY THAT ALL INFORMATION AND DOCUMENTATION I HAVE SUBMITTED PERTAINING TO THIS APPEAL IS TRUE.

Student's Signature _____ Date _____

Student's Name (printed) _____

Please return this completed form to the Office of Student Financial Aid and Scholarships, Chubb Hall 020, or fax to (740) 593-4140.

Timetable of Remaining Coursework for Degree Completion

Only to be completed by those students who are approaching or who have exceeded the maximum time frame for degree completion.

Student's Name _____

Student ID Number _____

Projected Graduation Date _____

Advisor's Signature _____

Tentative Courses for _____ QTR _____ YR Class Name _____ Credit Hours

Total Credit Hours _____

Tentative Courses for _____ QTR _____ YR Class Name _____ Credit Hours

Total Credit Hours _____

Tentative Courses for _____ QTR _____ YR Class Name _____ Credit Hours

Total Credit Hours _____

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