



FINANCIAL AID
SATISFACTORY ACADEMIC PROGRESS (SAP)
APPEAL FORM

Students in financial aid termination status for not meeting Satisfactory Academic Progress (SAP) standards who have extenuating circumstances may appeal their Financial Aid eligibility by:

- completing page 1 of the SAP Appeal form & preparing your documentation;
• meeting with your Academic Advisor, Faculty Advisor or Program/Department Chair to complete your Academic Progress Report (page 2); and
• returning the form and all required documentation to the Financial Aid Office / Express Enrollment Center.

You will be notified of the SAP Appeal Committee's decision at your Ivy Tech email address within 14 days of submitting your complete appeal packet. If your appeal is approved, you may maintain your financial aid SAP eligibility. If your appeal is denied, it will result in the loss of your financial aid eligibility until you regain Good standing. Incomplete appeal packets cannot be reviewed by the SAP Appeal Committee.

For more information on Ivy Tech's Financial Aid SAP policy, visit www.ivytech.edu/SAP.

Student Name _____ Student ID # C _____
E-mail Address _____ Telephone (____) _____
Home Address _____
City _____ State _____ Zip Code _____

Reason(s) you are not meeting Financial Aid Satisfactory Academic Progress (SAP):

- ___ Cumulative GPA below 2.0
___ Cumulative completion rate below 67%
___ Exceeds maximum timeframe

My appeal is for academic year: _____ / Semester: ___ Fall ___ Spring ___ Summer

Provide the following REQUIRED documents with your appeal (incomplete appeals may be denied or may not be reviewed):

___ A written or typed statement addressing all terms in which you did not meet SAP standards (semesters with W, F, I, or a GPA below 2.0). Your statement should include:
- What extenuating circumstances prevented you from meeting the standards?
- What changes and actions have you made that will enable you to now meet the standards?

___ Documentation of the extenuating circumstances you described in your statement.
- Examples might include: Medical documents, Death/birth certificates, Accident reports, Police reports

___ Academic Progress Report completed and signed by an Academic Advisor, Faculty Advisor or Program/Department Chair (see page two of the SAP Appeal form)

___ Your degree audit sheet and Academic Completion Plan (both will be provided when meeting with advisor/chair)

By signing this form, I understand that there is no guarantee that this appeal will be approved. If this appeal is approved, I agree that I will complete any future enrolled courses with grades of C or better and follow my Academic Completion Plan. I also understand that if I fail or withdraw from any classes while on financial aid probation, I will be terminated from financial aid with no further option to appeal. If this appeal is denied, I will be responsible for dropping classes prior to the 100 percent refund period or paying any balance due on my account.

Student Signature _____

Date _____

Student Name _____ C# _____

Academic Progress Report

To be completed by an Academic Advisor, Faculty Advisor or Program/Department Chair

Please sign and attach a degree audit sheet that indicates which courses have been completed and those left to complete the degree requirements. Also attach an Academic Completion Plan which includes a structure for completing these courses.

Has the student changed majors? [] Yes [] No

Does the student have a prior degree or certificate from Ivy Tech? [] Yes Major/Degree: _____ Date Earned: _____
[] No

Is the student in a secondary program? [] Yes – complete the both the Primary & Secondary Program Information sections
[] No – complete the Primary Program Information section

Primary Program Information:

Student's primary academic program _____ [] Associate [] Certificate
Number of credit hours required for the program _____ Expected Graduation Date _____
Number of credit hours the student has attempted that count toward primary program _____
Number of credit hours the student has attempted that do NOT count toward primary program _____
Number of credit hours remaining that the student needs to complete primary program _____

Secondary Program Information:

Student's secondary academic program _____ [] Associate [] Certificate
Number of credit hours required for the program _____ Expected Graduation Date _____
Number of credit hours the student has attempted that count toward secondary program _____
Number of credit hours the student has attempted that do NOT count toward secondary program _____
Number of credit hours remaining that the student needs to complete secondary program _____

Student Requirements for Success / Interventions:

Advisor Name (please print) _____

Email Address _____@ivytech.edu Phone #: _(_____)_____-_____

Department _____ Campus/Site: _____

Advisor Signature _____ Date _____

INTERNAL USE ONLY

Appeal Committee Decision: [] Appeal Approved [] Appeal Denied Date _____

Reviewer(s) initials _____