2015-2016

Satisfactory Academic Progress (SAP) Appeal

<table>
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<th>Submission Deadlines</th>
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<td>Fall 2015</td>
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<tr>
<td>Spring 2016</td>
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<td>Summer 2016</td>
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PLEASE REVIEW THE EXTENUATING CIRCUMSTANCES AS DEFINED BELOW (STEP 3).

IF YOUR CIRCUMSTANCES DO NOT FALL WITHIN OUR GUIDELINES OR YOU DID NOT ADHERE TO THE TERMS OF YOUR ONE TERM PROBATION, PLEASE DO NOT PROCEED IN COMPLETING A SAP APPEAL FORM.

YOU MAY SPEAK WITH A FINANCIAL AID COUNSELOR TO DISCUSS YOUR CIRCUMSTANCES AND ALTERNATIVE PAYMENT OPTIONS.
2015-2016 SATISFACTORY ACADEMIC PROGRESS APPEAL

Name________________________________ Date____________________

N#_________________________________________ Email____________________________

Steps 1 through 4 must be completed prior to seeing an academic advisor.

STEP 1: YOU MUST COMPLETE ALL OF THE STEPS OF THE SAP TO BE REVIEWED FOR A DECISION

Please indicate the semester for which the appeal is to be considered.

☐ Fall 2015
☐ Spring 2016
☐ Summer 2016

Have you had a previous appeal approved?

☐ No
☐ Yes (Indicate the semester of the previous appeal) ____________

Special Note: If you have failed to make Satisfactory Academic Progress (SAP) while on financial aid probation, you are not eligible to re-appeal your suspension.

STEP 2: YOU MUST CHECK YOUR MyUDC STUDENT PORTAL TO FIND THE REASON WHY YOU HAVE BEEN PLACED ON FINANCIAL AID SUSPENSION.

Check the reason(s) in which you are placed on financial aid suspension and which to appeal.

☐ Failure to meet the Quantitative Course Completion Rate
   Undergraduate and graduate students must successfully complete 67% of attempted credits by the end of each academic year.

☐ Failure to meet Cumulative Grade Point Average
   Undergraduate students are required to maintain a minimum cumulative GPA of 2.0. Graduate students are required to maintain a minimum cumulative GPA of 3.0.

☐ Exceeding Maximum Timeframe
   The timeframe of a student’s eligibility for financial aid is limited to 150% of the number of credits required to complete a degree as defined in the SAP Policy. Credits include attempted credits at the university and transfer credits accepted in satisfaction of course requirements for the degree. Note: A Degree Audit Plan, provided by your Advisor, is also required in addition to the Academic Success Strategies Plan.

STEP 3: CHECK THE EXTENUATING CIRCUMSTANCE(S) EXPERIENCED TO JUSTIFY YOUR APPEAL.

☐ Serious illness or injury to student or immediate family member – Documentation may include a signed letter on official letterhead from the appropriate medical professional that describes the nature and extended dates of the illness/injury. A doctor’s note stating the health has improved and the student is allowed to return to school is also required.

☐ Death of an immediate family or household member – Documentation must include a photocopy of the death certificate and/or the newspaper obituary that includes the name of the deceased and their relationship to you.

☐ Significant mental or physical trauma – Documentation may include a signed letter on official letterhead from a third party (e.g., physician, social worker, psychiatrist, court documents) that includes the dates and specific circumstances of your condition. If you have an ongoing medical or psychiatric problem, provide a statement regarding your current status and your ability to attend school.

☐ Dual Degree/Second Degree/ Transfer Credits/Change of Major – Documentation must include a degree audit plan signed by your academic advisor/department head defining the number of credits that will be applied to your degree program(s).
Office of Financial Aid  
4200 Connecticut Avenue, NW, Building 39, Suite A-133 Washington, DC 20008  
Phone (202)274-5060  
Fax (202)274-6060

STEP 4: PROVIDE THE FOLLOWING DOCUMENTS ALONG WITH THIS APPEAL FORM. YOUR APPEAL WILL BE REJECTED IF ANY OF THE BELOW ITEMS ARE MISSING:

- **Personal Statement Explaining Extenuating Circumstance** – Please provide a TYPED written statement explaining why you failed to make satisfactory academic progress and what has changed in your situation that will allow you to make satisfactory academic progress during the next evaluation period.

- **Submit Supporting Documentation** – Please provide supporting documentation to support your Personal Statement. This may include medical records of an extended injury or illness, death of relative, legal or other personal information. Please include your name and student ID on all pages of the supporting documents.

STEP 5: COMPLETE ACADEMIC SUCCESS STRATEGIES PLAN AND SEE ACADEMIC ADVISOR

- **Academic Success Strategies Plan** – Attached is a copy of your Academic Success Strategies Plan. It should be reviewed and signed by your Academic Advisor after your Appeal documents are completed. The plans must ensure you are able to meet the UDC Satisfactory Progress Standards and list what support services you will utilize to ensure successful completion of future coursework.

**PLEASE NOTE:** Do not visit with an academic advisor until you have completed steps 1-4.

**TERMS AND CONDITIONS:**

1. Failure to submit ALL required documents and signatures will deem your appeal INCOMPLETE & UNPROCESSED.
2. Students MUST check their MyUDC student portal and email for the decision on their SAP Appeal.
3. Appeals MUST be submitted at least two weeks prior to the next semester of planned attendance.
4. Students MUST allow at least two weeks to receive a response on their appeal.
5. Submission of this appeal does not guarantee approval.
6. Financial aid is not retroactive to any semester for which SAP standards were not met.
7. The complete SAP Policy is available in the Office of Financial Aid or online at www.udc.edu.
8. Students denied their appeal may regain eligibility by taking action that brings their academic progress into compliance with UDC's satisfactory academic progress standards.

**Student Certification:** By signing this Appeal form, I certify that I have read and understand the above requirements of this Appeal Application and the UDC Satisfactory Academic Progress (SAP) policy. I understand that if I met the terms of my financial aid probation (did not receive an F, I, or W and have a 2.00 for the term), but did not reach the cumulative 2.0 or 67% completion rate, I must again complete and submit the SAP appeal form to be considered for continued financial aid probation. I agree to the terms and conditions of this appeal and have provided ALL required information required for this appeal. I further certify that I acknowledge that submission of this Appeal form does not guarantee financial aid reinstatement and that all decisions are final.

_________________________            _______________________
Student Signature                                                                                                        Date

FINANCIAL AID OFFICE USE ONLY

Approved □ Denied □ Incomplete □

Notes in Banner □ Student Notified □

_________________________            _______________________
Financial Aid Officer Signature                                                                                                        Date

NOTES:
Academic Success Strategies

The following is an action plan to assist students in credit completion, for the purposes of maintaining good academic standing and federal student aid eligibility. Students should complete their action plan with a faculty or academic advisor, and submit with appropriate signatures for financial aid appeals.

A Degree Audit Plan will also need to be completed by the Academic/Faculty Advisor, in addition to this plan, for Maximum Timeframe appeals.

Student Name: ___________________________  N#: ______________________
Email:_____________________________________  Phone: ______________________

Student Academic History

☐ Prior Course Withdrawals (‘W’ grades)    ☐ Prior I/D/F Grades
☐ Academic Probation (cumulative GPA below 2.0)  ☐ Other: ____________________________

Most Recent Semester(s) of Concern

Semester(s): ______________
☐ Missed class sessions  ☐ Lack of communication with instructor
☐ Technological difficulties  ☐ Missing or incomplete assignments
☐ Difficulty with course material/concepts  ☐ Difficulty with quizzes or exams
☐ Difficulty with written assignments/essays  ☐ Other: ____________________________

To be completed by an Academic or Faculty Advisor

Credit Hour Information:

Type of Degree ___________________________________  Major _______________________
Total developmental credits attempted ___________  Total developmental credits completed ___________
Total UDC attempted credits for degree ___________  Total UDC completed credits for degree ___________
Total transfer credits applied to degree ___________  Total remaining credits needed to complete degree ___________

Is student able to complete their degree program within 150% timeframe?  ☐ YES  ☐ NO

Please list courses student is on course to take for the next three semesters.

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Recommendations for Improvement & Academic Success:

- Better time management
- Study hall and or tutoring
- Work one-on one with instructor
- Part-time class schedule
- Follow-Up Meetings with Academic Advising
  - Weekly Check-In Meetings
  - Bi-Weekly Check-In Meetings
  - Monthly Meetings

Advisor Name: __________________________ (print)

Other services:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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Student Certification: By signing below, I understand that my success at the University of the District of Columbia will depend on my follow through with the above recommendations and referrals made by my advisor. I agree to follow the Academic Success Plan created.

______________________________  __________________
Student Signature                  Date

Advisor Certification: By signing below, I certify that a program overview was completed for the student and the student was advised on courses they are to take to complete their degree. An Academic Success Plan was also created to help the student achieve their educational goals.

______________________________  __________________
Academic Advisor/ Faculty Advisor Signature                  Date

______________________________  __________________
Dept./ Office                  Campus extension
This sample letter is for students who are appealing following a semester on Financial Aid Warning. Be mindful that your advisor will not support your appeal if your portion of the SAP is either incomplete or your statement is not clear or specific. In this case, the advisor will ask you to revise your statement. Your advisor will not support your SAP appeal if s/he determines that you are unable or unwilling to follow recommendations given to you to help you return to good standing.

DIRECTIONS: This is how you should structure your appeal letter. Please make the letter concise, but as long as necessary to explain each area below. It is fine to make it more than one page. Please sign the letter before turning it in. Do not email or fax the final draft. DELETE THIS HEADER BEFORE SUBMITTING YOUR FINAL LETTER.

June 15, 2015 (put in the date you submit the letter and appeal form)

Joe Smith (put in your name)
555 Main Street NE (put in your street)
Washington, DC 20008 (put in your city, state, and zip)
Email (put in your email address)
Phone Number (put in your phone number)
Student ID (put in your Student ID number)

University of the District of Columbia
4200 Connecticut Ave NW
Washington, DC 20008

RE: Letter of Appeal

Dear Appeal Board:

My name is (insert your name) and I am submitting a letter of appeal. I did not make Satisfactory Academic Progress (SAP) following my semester on warning because (Please explain in full what happened to prevent you from making SAP.)

During my semester on Warning, I took many actions to help restore my academic standing. (Discuss the items on your support plan that you participated in while you were on Warning, such as the learning resource center, the PASS program, etc.)

I would also like to address what has changed in my life that will now allow me to make SAP in future semesters. (Please mention the mitigating circumstances that prevented you from making good academic standing and how that has changed.)

If I am placed on probation, I plan to (write about what changes you can continue to make if you are placed on probation.)

Thank you for your assistance with this matter.

Sincerely,

Sign your Name Here (Type your name below your signature)

Appeal, SAP2, and SAP3
This sample letter is for students who are appealing following a semester on Financial Aid Probation. Be mindful that your advisor will not support your appeal if your portion of the SAP is either incomplete or your statement is not clear or specific. In this case, the advisor will ask you to revise your statement. Your advisor will not support your SAP appeal if s/he determines that you are unable or unwilling to follow recommendations given to you to help you return to good standing.

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Email (put in your email address)
Phone Number (put in your phone number)
Student ID (put in your Student ID number)

University of the District of Columbia
4200 Connecticut Ave NW
Washington, DC 20008

RE: Letter of Appeal

Dear Appeal Board:

My name is (insert your name) and I am submitting a letter of appeal. I was granted a one term financial aid probation for the (insert semester). I adhered to the terms of my one term probation by not failing, withdrawing, or receiving incompletes. However, I have not reached the cumulative requirements to remove my SAP flag. Therefore, I am appealing to have my probation period extended for the (insert semester).

Thank you for your assistance with this matter.

Sincerely,

Sign your Name Here (Type your name below your signature)