

**Satisfactory Academic Progress Appeal Form**

Federal regulations require students to maintain Satisfactory Academic Progress (SAP) in three areas: **Cumulative GPA, Completion Rate, and Maximum Time Limit**- to be eligible for financial aid. It is the **student's** responsibility to stay informed of the University's SAP standards and to monitor their own progress. As a courtesy, the Financial Aid Office will send notification to permanent addresses for students who are not in compliance at the end of each semester.

In some cases, a student's failure to be in compliance with one or more areas of SAP is due to events totally beyond the student's control. If such "mitigating circumstances" can be documented for the specific term(s) when the deficiencies occurred, the student may submit this completed SAP Appeal, along with all required documentation. Should your appeal be approved you will receive an award letter; if your appeal is denied you will receive a letter of notification.

Student Name: \_\_\_\_\_ UHV Student ID No. \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 Street address City State Zip

E-Mail Address \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Semester this appeal is to be considered for: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer

Reason for loss of financial aid eligibility:

\_\_\_\_\_ Did not meet the terms of a previous appeal \_\_\_\_\_ Semester/academic year of previous appeal

\_\_\_\_\_ Did not meet the GPA standard (2.00/undergraduate, 3.00/graduate)

\_\_\_\_\_ UHV Completion rate is below minimum requirements (62% Undergrad, 62% Post Baccalaureate, 67% Graduate)

\_\_\_\_\_ Exceeded maximum number of hours (170 attempted Undergrad, 100 attempted Post Baccalaureate, 72 attempted Graduate)

If you exceeded the maximum hours limitation, please list the courses remaining in your program and the date that you expect to complete each course:


- Required documents for ALL appeals:**
- A detailed letter of explanation.
  - Signed Degree Plan
  - Completed Satisfactory Academic Appeal form
  - Provide necessary documentation to assist the committee in reaching their decision

Please indicate the kinds of problems that have contributed to your inability to maintain satisfactory academic progress (**check all that apply**):

\_\_\_\_\_ Personal Problems (family issues, relationship issues)

\_\_\_\_\_ Serious illness or injury to student that required extended recovery time \*

\_\_\_\_\_ Death or serious illness of an immediate family member \*

\_\_\_\_\_ Significant trauma in student's life that impaired the student's emotional and/or physical health \*

\_\_\_\_\_ Other mitigating circumstances requiring documentation \*

\_\_\_\_\_ Academic major problems (can't or couldn't decide on a major, changed major and some classes won't transfer to new degree)

\_\_\_\_\_ Job related problems (need a job, need to change jobs, other)

\_\_\_\_\_ Other \_\_\_\_\_

Explain in detail what steps you have taken to correct the problems that have prevented you from maintaining satisfactory ic progress (attach a separate sheet of paper if necessary):

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

ACADEMIC ADVISOR SECTION

If the student has exceeded the maximum hour limitation, how many hours remain before the student can receive his/her degree? \_\_\_\_\_ Expected graduation date: \_\_\_\_\_

Has the student completed a degree plan and/or been provided with any additional advice regarding the successful completion of his/her degree requirements? Please provide details below:

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Advisor's signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*ALL STUDENTS MUST SUBMIT A CURRENT ACADEMIC TRANSCRIPT WITH THE APPEAL\*

I understand that the Financial Aid Office will not accept any SAP Appeal that is incomplete or lacks documentation. I am submitting my complete SAP appeal and a signed copy of my degree plan. I further understand that decisions are made on a case-by-case basis. I have read the UHV Satisfactory Academic Progress Policy. If approved, I will be expected to make academic progress in the semester for which my appeal has been approved. I will be notified by mail of the committee's decision.

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

FOR OFFICE USE ONLY

[ ] FIRST APPEAL APPROVED [ ] SECOND APPEAL DENIED

UHV Committee's Decision:

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Financial Aid Coordinator Signature \_\_\_\_\_ Date \_\_\_\_\_

Private Notice

State law requires that you be informed of the following: (1) with few exceptions your entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.