

2026-2027

SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FORM

First Name: _____ Middle Initial: _____ Last Name: _____

University Email: _____ Student ID: _____

Appeal Guidelines

A student who is no longer eligible for federal or institutional financial aid due to failure to meet Satisfactory Academic Progress (SAP) standards and who has been placed in Financial Aid Suspension may appeal this status. Appeals are reviewed on a case-by-case basis and the student will be notified via their university email with an appeal decision. For the full policy, visit: www.husson.edu/financial-aid/keeping-your-financial-aid.

Submitting an appeal does not guarantee approval and appeals without all required documentation or submitted after the deadline will not be reviewed. Incomplete appeals or appeals submitted after the deadline may not be processed and your financial aid may be cancelled. It is the responsibility of the student to ensure their appeal is turned in; it is not the responsibility of the Academic Advisor.

Submission Instructions and Deadlines

SUBMISSION INSTRUCTIONS:

- ☐ Review your SAP Standard(s).
- ☐ Complete all sections of the SAP appeal.
- ☐ Gather supporting documentation and attach them to this form.
- ☐ Meet with an Academic Advisor and review section 2, which requires the advisor's signature.
- ☐ Submit the completed appeal to the Office of Scholarships and Financial Aid by the deadline. It is the responsibility of the student to ensure that their appeal is turned in; **it is not the responsibility of the student's academic advisor.**

DEADLINES: It is recommended that you submit your SAP appeal as soon as you are notified that you have been placed in SAP suspension. The final deadline to submit your SAP appeal is the mid-point of the following semester.

Understanding your SAP Standards (required)

In order to prepare for the meeting you will have with your advisor, start by reviewing what SAP Standard(s) you are not meeting.

There are three SAP Standards that students must meet in order to be eligible for financial aid. Please see the SAP policy for the criteria based on your attempted credits at www.husson.edu/financial-aid/keeping-your-financial-aid.

- GPA
- Pace (# of earned credits/# of attempted credits)
- Maximum Timeframe (students may not exceed the maximum timeframe in which they are expected to complete their program)

Which standard(s) are you not meeting? Mark all that apply.

☐ GPA ☐ Pace ☐ Maximum Timeframe

Current GPA: _____

Credits Earned: _____

Credits Remaining to Graduate: _____

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FINANCIAL AID

Section 1: Student Circumstances – Completed by the student (required)

This section is for you to explain the extenuating circumstance(s) that impacted your academic performance and led to not meeting SAP standards. It will also outline what measures you plan to take to meet SAP standards.

Examples of extenuating circumstances and relevant documentation to include (but are not limited to):

Extenuating Circumstance

- Death of a family member or person of significance
- Accident, serious injury, illness, disability, or serious illness of immediate family member
- Other unusual circumstances that are beyond the student's control

Supporting Documentation Could Include

- Copy of an obituary or death certificate
- Police report, hospitalization record, letter from doctor, therapist, or counselor, written statement from relative or other third party who is aware of your situation
- Written statement from academic advisor or other professional third-party (on letterhead) who can attest to the situation

Describe below the reason(s) that you failed to meet the SAP standard(s). If your appeal is based on your own mental and/or physical illness, injury or disability provide a statement below without describing the condition itself. If these circumstances covered more than one semester, address the relevant circumstances for each semester that you did not meet the standard(s). Attach additional pages, if necessary.

Describe the steps you have taken to ensure that you will be academically successful and meet Satisfactory Academic Progress standards in the future. How have your extenuating circumstances been resolved, or changed, so that you can progress toward your degree if your appeal is approved? If this is not addressed in your personal statement, your appeal will be rejected. Attach additional pages, if necessary.

Section 2: Academic Plan – Completed by student with academic advisor (required)

The purpose of an academic plan is to set criteria for which a student must adhere to in order for the student to remain eligible for financial aid. All students who are filing an appeal must also complete an academic plan. Academic plans may consist of, but are not limited to, a maximum course load per semester, minimum GPA, minimum grade per class, tutoring services, counseling services. If, at the end of the next payment period, the student has not met the requirements of their academic plan, they will be disqualified from receiving financial aid.

If the student is not meeting SAP due to the GPA standard, please complete section A. If the student is not meeting SAP due to the Pace or Maximum Timeframe Standard, please complete section B. If the student is not meeting any of the standards, please complete section A and B.

Section A: Academic Plan – GPA

Please select and complete one or more of the following:

- ☐ Student will enroll in a maximum of ____ credits per semester. **(Please note that enrolling less than full-time may have other financial implications).**
- ☐ Student will earn a minimum grade of ____ in all classes attempted.
- ☐ Student will earn a minimum GPA of ____ per semester.
- ☐ Student will engage in tutoring services a minimum of ____ times per week/month/semester (circle).
- ☐ Other (please describe in detail):

Section B: Academic Plan – Pace/Maximum Timeframe

Please select and complete one or more of the following:

- ☐ Student will enroll in a maximum of ____ credits per semester. **(Please note that enrolling less than full-time may have other financial implications).**
- ☐ Student will earn 100% of credits attempted.
- ☐ Student will earn a minimum GPA of ____ per semester.
- ☐ Student will engage in tutoring services a minimum of ____ times per week/month/semester (circle).
- ☐ Other (please describe in detail):

Please read and sign below to verify that you met with the student and discussed the following,

- I have reviewed with the student the Satisfactory Academic Progress standard(s) that they are not meeting.
- We have discussed steps that the student can take in order to ensure they will be academically successful and meet Satisfactory Academic Progress standards in the future.
- We have discussed support services that the student may be able to utilize in order to improve academically.
- I have advised the student regarding the successful completion of degree requirements.

Advisor Name: _____ Advisor Email: _____

Advisor Signature: _____ Date: _____

Section 3: Student Certification (required)

Please read and sign below to verify that you met with the student and discussed the following,

- I understand submission of this appeal is only a request and does not guarantee financial aid eligibility reinstatement.
- I understand I am currently not eligible for financial aid, and am responsible for any university charges on my account.
- I understand if my appeal is approved, I must follow the SAP Academic Plan probation conditions that are listed on page three of this form.
- I understand that if my appeal is approved, I cannot fail or withdraw from any classes.
- I understand that if I fail to meet my probation conditions, or fail to meet any other SAP standard, I will become ineligible for institutional, federal and state financial aid as well as certain private loans.
- I understand that I cannot re-appeal for the same extenuating circumstances if I fail my probation conditions.
- I certify that the information I have provided is complete, accurate, and true to the best of my knowledge and that all copies of supporting documentation are unaltered.
- I have read and understand the SAP Policy which can be found at www.husson.edu/financial-aid/keeping-your-financial-aid

Student Name: _____

Student Signature: _____ Date: _____

Section 4: Submission Instructions

Please take advantage of the opportunity to submit this form via the **upload documents to Financial Aid** tab on the student portal. Other methods of submission include email finaid@husson.edu, mail, fax **207.992.4930**, or in person drop off.