

2018-2019 Satisfactory Academic Progress (SAP) Appeal

Enterprise State Community College is required by federal regulations to determine whether a student is maintaining Satisfactory Academic Progress (SAP) in his or her chosen degree plan. Students who have been denied federal financial aid because they have not met the requirements of the ESCC SAP Policy are offered the opportunity to complete the ESCC Financial Aid appeal process to be considered for an exemption from the policy.

In some cases, a student's failure to meet SAP requirements is due to events beyond the student's control. If there are documentable circumstances for the term(s) when the student's deficiencies occurred, the student may submit this completed appeal form and provide a written statement and documentation as noted below.

STUDENT INFORMATION:

Student Name: _____ Student Number: _____

Phone Number: _____ Email Address: _____

Program of Study: _____

TERM FOR APPEAL:

Please indicate the term for which you are requesting reconsideration: *(Appeal forms are due 30 days before the first day of class for the semester indicated.)*

<input type="checkbox"/> FALL 2018 <i>Submit by July 20, 2018</i>	<input type="checkbox"/> SPRING 2019 <i>Submit by December 7, 2018</i>	<input type="checkbox"/> SUMMER 2019 <i>Submit by April 19, 2019</i>
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STEP 1: Below please indicate which situation/s applies to your academic difficulty:

- Medical:** A personal medical problem contributed to your failure to maintain satisfactory academic progress. Attach documentation from a medical professional from whom you have received treatment.
- Death/Illness:** The death or illness of an immediate family member contributed to your lack of academic progress. Attach appropriate copies of medical records, death certificate, obituary, etc.
- Military Service:** You have withdrawn due to military service. Attach a copy of your military orders.
- Other Circumstances:** Clearly state the circumstances (not listed above) in your appeal letter and provide appropriate documentation.

STEP 2: Provide a typed explanation of your circumstances.

On the back of this form or on a separate sheet of paper explain in detail the circumstances which directly affected your academic progress and the steps that you are taking to improve your academic record.

STEP 3: Please read and initial each statement below:

- _____ **I understand that my application must be received by the ESCC Financial Aid Office 30 days prior to the start of the semester for which I am trying to establish eligibility. If I appeal after this deadline I understand that I am responsible for paying before the end of the drop/add period.**
- _____ I understand that submission of a SAP appeal does not guarantee reinstatement of eligibility and I am responsible for making payment arrangements for any charges I owe regardless of the outcome of my appeal.
- _____ I understand that I must schedule an appointment for SAP counseling at which time my appeal will be reviewed and either approved or denied.
- _____ I understand that if my appeal is approved, I must pass every class in which I enroll with at least a "C" or better. I must not drop any classes and must have a GPA of at least 2.0 for each semester, or my probationary eligibility will be terminated.
- _____ I understand that if I submit this appeal form after the designated deadline, my request will not be evaluated until the next semester.

OFFICE USE ONLY:

_____ <67%	_____ <2.0 GPA	_____ Current GPA	_____ # of Appeals
Action: _____ Approved		_____ Denied	
Signature: _____		Date: _____	

Large empty rectangular box for student signature and date.

STUDENT SIGNATURE: _____ DATE: _____

Please return this appeal form and all documentation to your designated Financial Aid Office:

ESCC Financial Aid Office
P.O. Box 1300
Enterprise, AL 36331
or
Fax to 334.347.0191

Alabama Aviation Center
3405 South US Highway 231
Ozark, AL 36360
or
Fax to 334.774.0477