



Center for Student Financial Aid
California State University, Los Angeles

5151 State University Drive, SA 124
Los Angeles, CA 90032-8402
Phone: (323) 343-6260
Fax: (323) 343-3166

2017-18
05/2017

For office use only:

2017-18 Satisfactory Academic Progress (SAP) Appeal Instructions

Federal and State regulations governing student financial aid require aid recipients maintain standards of reasonable academic progress towards completion of their degree or certificate. For a complete description of the [Satisfactory Academic Progress Policy](http://www.calstatela.edu/financialaid/), visit our website at <http://www.calstatela.edu/financialaid/>.

Appeal Process: Students who are deemed **ineligible to receive financial aid** for not meeting satisfactory academic progress (SAP) standards and have extenuating circumstances beyond their control may submit a SAP appeal to the Financial Aid Office. Here are examples of conditions that would be reviewed favorably: Death of family member, your own serious illness or injury, approved medical withdrawal, compulsory military duty, and extreme personal hardship.

Appeals will NOT be viewed favorably for reasons such as: Situations that could have been anticipated, dissatisfaction with course materials or instructor, lack of motivation, change in majors, participation of extracurricular activities, or unit overload.

For a more details, please refer to the [SAP policy](#).

Special Note: Appeal review may take a minimum of 3-4 weeks. You will be notified by email of our decision. ***Incomplete Appeals will be returned and may be “Denied” without further review.*** If you have registered for classes or intend to register for classes, ***you are responsible for paying your registration fees by the payment deadline*** as specified in the Schedule of Classes.

Appeal Deadline: All appeals must be submitted 4 weeks from the date of the SAP communication

APPEAL INSTRUCTIONS:

STEP 1: Complete and sign the 2017-18 Satisfactory Academic Progress (SAP) Appeal Form.

STEP 2: Submit a typed statement of explanation. Your statement must clearly explain the following:

1. What were the circumstances beyond your control that prevented you from meeting the satisfactory academic progress standards?
2. What was your responsibility for these events?
3. How have your circumstances changed so that academic success will be maximized?
4. What steps have you taken to ensure you will make Satisfactory Academic Progress in the future?

STEP 3: Attach Supporting Documentation

Depending upon your circumstances and the nature of the appeal, you must submit supporting documents (i.e., letter from your doctor, copy of a death certificate, etc.). A personal statement of explanation will not be accepted as “supporting documentation.”

SAP Appeals for ***not meeting minimum cumulative GPA*** must include:

1. Memo from academic advisor that outlines how you will improve your cumulative GPA.
2. A completed Academic Plan Form listing the recommended courses you have been advised to enroll in by your academic advisor. The form must have the Department’s stamp or seal.

SAP Appeals for ***excessive units beyond the maximum time frame of aid eligibility for degree completion*** must include:

1. Academic Plan form which lists **ALL** remaining courses required to complete your degree and expected term of graduation. Attach additional page(s) if needed.
2. A copy of your “**Degree Progress Report**” available online via GET under “Academic Requirements.”
3. Masters and Teaching Credential Students: A copy of your Official Program signed by the Department Chair or designee in addition to the above two documents is required.



Center for Student Financial Aid
California State University, Los Angeles

5151 State University Drive, SA 124
 Los Angeles, CA 90032-8402
 Phone: (323) 343-6260
 Fax: (323) 343-3166

2017-18
 05/2017

For office use only:

2017-18 Satisfactory Academic Progress (SAP) Appeal Form

 Last Name First Name M.I. Campus Identification Number Phone Number (include area code)

Please select academic level:

- Undergraduate Graduate/Masters Teaching Credential EDD (PhD)
 Post-Bacc/2nd Bachelor's Graduate Student pursuing 2nd Master's Degree Certificate Program

STEP 1: Select the reason(s) for your appeal (check all that apply):

- Minimum Cumulative Grade Point Average Standard
 Minimum Cumulative Pace of Completion Standard (If you check this box, an Academic Plan must be submitted)
 Maximum Time Frame of Aid Eligibility for Degree Completion Standard (If you check this box, an Academic Plan must be submitted)

STEP 2: Select which term you are appealing to receive financial aid for: Fall '17 Spring '18 Summer '18

STEP 3: Attach a statement of explanation (see instructions listed on previous page).

STEP 4: Attach supporting documents (see instructions listed on previous page).

Student Statements of Understanding

My signature below acknowledges the following:

- The information on this form and in any attachments is complete and accurate. I authorize the Center for Student Financial Aid to verify any information submitted.
- I understand that the submission of this appeal does not guarantee reinstatement of financial aid and that I will be responsible for any account balance should I decide to continue enrollment.
- I understand that this appeal should be submitted as soon as possible but no later than 4 weeks from the date of my SAP ineligibility notice.
- I understand the SAP Appeal review process may take a minimum of 3-4 weeks (or longer) and am responsible for paying my registration fees by the payment deadlines specified in the "Schedule of Classes" in order to register for classes or avoid being dropped from my classes.

Student's Signature: _____

Date: _____

OFFICE USE ONLY

- Appeal approved (probation) for term(s): Fall '17 Spring '18 Summer '18
 Excessive Units – Approved up to: _____ Units Appeal Denied – Appeal Form Incomplete
 2nd Masters or 2nd BA – Approved up to: _____ Units Appeal Denied for the following reason(s):

Reviewed by _____
 (Financial Aid Advisor)

Date: _____



**Center for Student Financial Aid
California State University, Los Angeles**

5151 State University Drive, SA 124
Los Angeles, CA 90032-8402
Phone: (323) 343-6260
Fax: (323) 343-3166

2017-18
05/2017

For office use only:

2017-18 Satisfactory Academic Progress (SAP) Appeal - Academic Plan

Last Name _____ First Name _____ M.I. _____ Campus Identification Number (CIN) _____
 Current Major _____ Phone Number (include area code) _____
 Grade Level: Undergraduate Graduate/Masters Teaching Credential Post-Bacc/2nd Bachelor's EDD (PhD)

An Academic Plan is required for students whose aid has been suspended due to **GPA deficiency or Excessive Units (Pace and/or Maximum Time Frame Standards)**. *Course listings should be completed by the Academic Advisor "not" by the student.*

Fall 2017	
Required Course Description (i.e. PPS2500)	Units

Fall 2018	
Required Course Description (i.e. PPS2500)	Units

Spring 2018	
Required Course Description (i.e. PPS2500)	Units

Spring 2019	
Required Course Description (i.e. PPS2500)	Units

Summer 2018	
Required Course Description (i.e. PPS2500)	Units

Please attach a separate sheet of paper if additional terms are needed beyond Spring 2019

TOTAL Additional Units Needed for Graduation: _____

Expected Term of Graduation (Program Completion):

Term: _____ Year: _____

Student's Signature: _____ Date: _____

Course listings MUST be completed by the Academic Advisor not by the student

Name of Academic Advisor: _____ Date: _____

Advisor's Signature: _____

Include Department Stamp or Seal Here