

# FINANCIAL AID ACADEMIC PROGRESS (SAP) APPEAL FORM

The semester being appealed:

Student ID: \_\_\_

Student's Name (Last, First)

「erm	/Year:	

Phone:

### To submit a Financial Aid Academic Progress Appeal, students must:

- Have a current completed FAFSA or Dream Act Application on file at PVC.
- Be registered for class(es)
- Have reviewed the SAP requirements.
- Submit the appeal application 3 weeks before the last day of the current term.

#### **Required Documentation (MUST SUBMIT ALL THREE OR PETITION IS DENIED AUTOMATICALLY)**

- Appeal form. (Must be complete, signed and dated).
- Student statement. (Statement must be signed and dated).
- Supporting documentation of extenuating circumstances (e.g., police report, hospital records, death certificate).
- Updated Educational Plan (signed by student and academic counselor).

### Reason(s) for appeal:

PACE/GPA: Completing less than 67% of total attempted units or not maintaining a cumulative GPA of 2.00 or:

Maximum Time-frame: Exceeding maximum number of units allowed for active degree/program

### **STUDENT STATEMENT INSTRUCTIONS:**

Attach a statement that addresses why satisfactory academic progress was not met. The statement should include what extenuating or mitigating circumstances prevented student from meeting the SAP standard(s) marked above. Indicate how the situation has now changed or been resolved. A form is provided but is not required to use but statement MUST be typed,

### APPEAL SUBMISSION:

- The submission of an appeal is not a guarantee of approval.
- Appeals are reviewed by an Academic Appeals Committee.
- Students are notified by email of the committe's decision.
- Review and response times may vary during peak periods.
- Incomplete submissions are automatically denied.

By signing, I am stating that the information provided in my application is true and correct to the best of my knowledge.

Student Signature:	Date:
OFFICE USE:	
FAO or (Auth. Rep) Signature:	Decision: Approved /Denied /Tabled:



## STUDENT PERSONAL STATEMENT FORM

FINANCIAL AID OFFICE	DEGREE/PROGRAM:	
	CURRENT ACAD YEAR & TERM:	
STUDENT NAME:	STUDENT ID:	_
STREET ADDRESS:		-
CITY, STATE, ZIP:		

Explain the circumstances that contributed to not meeting SAP requirements. Refer to academic transcripts for the appropriate semester(s) where event (s) occurred. Include as much relevant detail as possible. Explain the steps taken to resolve those circumstances and what actions are being taken now to ensure SAP standards and educational goals are met. Attach a separate piece of paper if more detail is needed.

### STUDENT MUST PROVIDE DOCUMENTATION IN ADDITION TO THEIR PERSONAL STATEMENT

STUDENT'S SIGNATURE:

DATE:

By signing, I am stating that the above statement is true and correct to the best of my knowledge.



### **STUDENT EDUCATION PLAN**

To be submitted with SAP Petition

## **FINANCIAL AID OFFICE**

PROGRAM OF STUDY:

STUDENT NAME: \_\_\_\_\_ PVC ID# \_\_\_\_\_

## **INSTRUCTIONS:**

- Meet with your academic counselor to review remaining degree requirements and revise your education plan.
- Submit your Educational Plan along with the appeal application.

## **GUIDELINES:**

- NO CHANGES TO DEGREE OR CLASS SCHEDULES WITHOUT PRIOR APPROVAL FROM FINANCIAL AID DIRECTOR.
- · Students not following their ed plan or other contract stipulations will have their probation status revoked and are no longer eligible for financial aid.
- Only classes below are eligible for financial aid.

COURSES FOR	20	COURSES FOR	_ 20
REQUIRED	UNITS	REQUIRED	UNITS
1.		1.	
2.		2.	
3.		3.	

COURSES FOR	_ 20	COURSES FOR	20
REQUIRED	UNITS	REQUIRED	UNITS
1.		1.	
2.		2.	
3.		3.	

## SIGNATURES:

COUNSELORS SIGNATURE:	Dате:
STUDENTS SIGNATURE:	Dате:
COMMENTS:	

Palo Verde College \* Financial Aid Office One College Drive, Blythe, CA 92225 Email: financialaid@paloverde.edu Phone: 760-921-5500