

# Satisfactory Academic Progress 150% Appeal Form

#### **Instructions**

You may appeal the suspension of your financial aid eligibility resulting from your failure to meet the College's minimum standards governing Satisfactory Academic Progress by submitting this form, along with supporting documentation of the extenuating circumstances which have affected your academic progress, by the appropriate deadline date. Only valid appeals will be reviewed by the SAP Review Committee. A valid appeal includes the complete Satisfactory Academic Progress Appeal Form, with the appropriate documentation to support your Appeal Statement. Only appeals with documented extenuating circumstances will be considered. Appeals received after the deadline date will be considered for the next term. All decisions by the Committee are final and cannot be appealed further. You will need to access your Banner Web account to review the results of the appeal decision. Click on Banner Web, then Financial Aid, and then Display SAP. An approved appeal decision may impose limitations upon your financial aid eligibility and/or future minimum academic standards. A copy of the Satisfactory Academic Progress Policy can be found on the Columbus Technical College Office of Financial Aid website.

How is Satisfactory Academic Progress (SAP) measured for Student Aid Eligibility?

- Cumulative GPA: Maintain a cumulative GPA of 2.0 and
- Pace: Successfully complete 66.66% of courses attempted (institutional and transfer hours); and
- **Maximum attempted hours:** Aid is allowed up to 150% of the published program length hours. Maximum hours per degree program type:
  - o Associates Degree: 150% of 60 credit hours = 90 credit hours
  - o Diploma Programs: 150% of 42 credit hours = 63 credit hours
  - o Certificate Programs: 150% of 20 credit hours = 30 credit hours

### **Demographics**

Last Name	First Name
Student ID	
Phone Number	
E-mail	

#### **Circumstances**

In the list below, check each circumstance(s) that applies and attached supporting documentation:

#### **Emotional**

Death of an immediate family member (parent, grandparent spouse, sibling, child)

Separation/Divorce experience by you or your parent

Sick close relative

Financia	al .
Job I	LOSS
Incre	ease work hours
Evict	ion
Hom	eless
Car I	oss/impaired, or other
Physica	!
Serio	ous illness, accident, or injury, to student or immediate family member (parent, spouse,
siblir	ng, child)
Hosp	oitalization for at least 5 consecutive days
Signi	ficant trauma in student's life that impaired the student's emotional health
Mental	
Lear	ning disability
Psyc	hological disorder as defined by doctor/psychiatrist such as depression, Post-Traumatic-
Stres	ss Disorder (PTSD), Attention Deficit Hyperactivity Disorder (ADHD), or other.

# Military

Call to duty, or other

\*\*For Maximum Timeframe Only Students: Did you change your major/program of study:
Yes
No

## **Statements**

Circumstance: Please provide an explanation below of the circumstance that occurred which caused you to fall below the minimum financial aid academic standards.		

Resolution: List the thing(s) that have changed in your circumstance that will permit you to focus on your academic performance.		
Resolution: List the steps you will take to improve your acac	emic performance.	
Certification and Signatures By signing this form, you certify that all of the information	you have reported is complete and correct	
WARNING: If you purposely give false or misleading inforr		
sentenced to jail or both.		
Student Signature	 Date	