

Satisfactory Academic Progress Appeal 2017-2018

Student Name: _____
PLEASE PRINT

UMID Number: _____ Email Address: _____

DIRECTIONS:

- Complete all items on page 1.
- Your academic advisor(s) must complete all items on page 2.
- Attach appropriate documentation and return to the Office of Financial Aid.
- Appeal by these deadlines (*appeals received after these deadlines will not be considered until the following term*):

NOV. 1
to receive aid
for Fall Term

MARCH 1
to receive aid
for Winter Term

JUNE 1
to receive aid
for Spring Term

AUG. 1
to receive aid for Summer &
16-wk Spring/Summer terms

I was unable to maintain Satisfactory Academic Progress during the previous academic period because (please check one):

- 1. **I experienced a death or major illness within my immediate family.**
- 2. **I experienced a personal illness or injury.**
- 3. **Other special circumstance**
- 4. **Withdrawal from all classes in a term**

Please attach a detailed statement explaining the specific circumstances that prevented you from making Satisfactory Academic Progress. Attach as many additional pages as needed to fully explain your individual circumstance(s). Personal statements that do not provide sufficient information may cause your appeal to be denied. Also attach documentation of your situation.

Please explain what has changed and/or how you will address the circumstance(s) described above so that you can successfully complete your academic program. Attach any additional documentation, as needed.

(continued)

