



# 2022-2023 Satisfactory Academic Progress Appeal

Financial Aid

**Clark State College students receiving federal financial aid are required to meet Satisfactory Academic Progress (SAP) standards. Evaluation of SAP is completed at the end of each semester. Students who do not meet the SAP standards have the right to appeal. Clark State policy allows each student two approved SAP appeals during their enrollment at Clark State.**

**Students are considered to have an eligible SAP status if they:**

- Maintain the required cumulative grade point average (GPA) of 2.00 or better.
- Satisfactorily complete enough credit hours to have a completion rate of 67.0% or higher.
- Will graduate within 150% of the credit hours required to complete their academic program.

**To review the SAP policy, refer to: [Clark State S.A.P. Policy](#)**

Satisfactory Academic Progress appeals can be filed by students to document unforeseen and extenuating circumstances that impacted the student’s ability to make academic progress.

Appeals must be submitted 10 days before the start of the semester the student is seeking reinstatement of federal student aid. Students will be notified of the decision (Approved, Pending or Denied) by email to their Clark State student email.

**All appeals must be signed by the student and Staff/Faculty Advisor or Retention Specialist and include an Academic Plan that plans all courses needed to complete program and supporting documentation.**

## SECTION A: Student Information

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_

## SECTION B: Extenuating Circumstance(s)

Provide a typed, signed detailed statement explaining what happened that affected your academic progress (for example, death in the family, major illness or unexpected employment changes). Include the dates of each occurrence and documentation to verify the circumstances.

## SECTION C: Steps for Success

Provide a typed, signed detailed statement explaining how the extenuating circumstances were resolved and what steps you have taken or are planning to take to taking to regain successful academic progress.

## SECTION D: Supporting Documentation

Please select one or more of the following that is included to support your appeal:

- Academic Plan
- Documentation of illness and treatment. Please include dates: \_\_\_\_\_
- Obituary/death certificate
- Proof of visit with/ letter from campus resources (check all that apply):
  - Office of Accessibility
  - TRiO Staff
  - Counseling Services
  - Office of Student Support
  - Student Success Center (Tutoring)
  - Other: \_\_\_\_\_



Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

**SECTION E: Pell Grant and Loan Usage**

As a Federal Student Aid recipient, it is wise to periodically review your grant and loan usage. To complete this step, do the following:

1. Go to <https://studentaid.gov>
2. Log in using your FSA ID
3. Select "My Student Data Download," at the top of the page

My Pell grant usage is \_\_\_\_\_% out of 600% Lifetime Eligibility

My subsidized loan amount is: \$\_\_\_\_\_ out of \$\_\_\_\_\_ (maximum, view table below)

My unsubsidized loan amount is: \$\_\_\_\_\_ out of \$\_\_\_\_\_ (maximum, view table below)

| FAFSA Dependency Status | Subsidized Maximum     | Unsubsidized Maximum                                | Total Aggregate Loan Limit                            |
|-------------------------|------------------------|---|---|
| Dependent               | \$23,000 (if eligible) | \$8,000 (\$31,000 -if not eligible for Subsidized)  | \$31,000 (combination of Subsidized and Unsubsidized) |
| Independent             | \$23,000 (if eligible) | \$34,500 (\$57,500 -if not eligible for Subsidized) | \$57,500 (combination of Subsidized and Unsubsidized) |

**SECTION F: Confirmation of academic advising meeting to discuss student's academic plan.**

Staff/Faculty Advisor/Retention Specialist: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Plan

**SECTION G: Certification Statement**

I certify that all of the information on this form and accompanying documents are true and complete to the best of my knowledge. Furthermore, I affirm that I have not knowingly or intentionally provided any false or fraudulent documentation.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Appeal Approved

Appeal Denied

Appeal Pending

FA Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Comments (Academic Plan, Program, Anticipated SAP-in-Compliance Term, or Graduation Term):

SAP Committee Review (beyond First Appeal): \_\_\_\_\_ Date: \_\_\_\_\_

Appeal Approved

Appeal Denied

Appeal Pended