



Graduate Satisfactory Academic Progress (SAP) Appeal Worksheet

Student Information:

Full Name _____ AU ID Number _____

Date of birth ____ / ____ / ____ Phone number (include area code) _____

AU Email Address: _____

Graduate SAP Requirements:

To remain eligible for Federal financial aid, a graduate student must meet ALL of the following requirements:

- Maintain a minimum cumulative GPA of 3.0 or better
- Complete at least two-thirds (66.67%) of all cumulative attempted credits.
- Complete the degree program within the maximum time frame as defined in the AU Academic regulations
 Certificate - - - - - 4 years Masters/MBA Degree - - - - - 6 years PhD Degree - - - - - 9 years

For the complete SAP Policy, please see: <http://www.american.edu/financialaid/satisfactoryprogress.cfm>

Required items for appeal: *Failure to include all these items will result in an automatic denial by the Appeals Committee. All information submitted to the Financial Aid Office will be kept confidential.*

- A completed SAP Appeal Worksheet**
- Typed Statement:** Provide a detailed explanation of the extenuating circumstances that impacted your ability to meet the SAP requirements. You must address all terms where you experienced academic problems or withdrawals. Describe how you made an effort to meet the responsibilities during the time of your extenuating circumstances and how your circumstances have improved. Include what actions have been taken and/or will be taken to address the extenuating circumstances.
- Supporting Documentation** to confirm the extenuating circumstances and actions taken as described in your typed statement. The type of document(s) you attach will vary depending on what you wrote in your typed statement. For example, if you indicated a medical issue in your letter, then you should attach a letter from your doctor confirming the medical issue existed, that treatment was/is underway, and that you are able to return successfully to school. If you indicate that tutoring is a part of your plan to get back on track, then a copy of your tutoring schedule or letter from your academic advisor may serve as supporting documentation.
- Plan of Study** indicating what courses will be taken over the next year, how many credits are needed to graduate, and the anticipated graduation date.
- If you are exceeding the maximum time frame, your appeal letter must also include a copy of your approved **Extension of Candidacy**.

Appeal Review Information:

All appeals must be submitted in writing by the student and addressed to: "Financial Aid Office Re: SAP Appeal." Appeals will not be accepted from parents or other third parties. Appeals may be submitted via fax to 202-885-6064 or via email to financialaiddocuments@american.edu.

The Financial Aid Appeals Committee will only review complete appeals, so all required documentation must be attached. Once a **complete appeal** has been received, a written response will be rendered within 7-10 business days.

If approved, the written response will include the approved actions that must be taken over the next semester to remain eligible for financial aid and the date the next SAP review will take place. A student with a successful appeal will be allowed to receive aid for ONE SEMESTER only. At the end of that semester, an additional SAP review will be conducted to ensure that the student is meeting the terms of the SAP appeal. If the student is found to be meeting the terms of the approved appeal, aid will then be awarded for an additional semester. This review will take place on a semester basis until the next scheduled annual review occurs in May 2018.

Type of Appeal : (indicate all that apply)

- Grade Point Average (GPA)-** If this appeal is based upon your cumulative grade point average , your statement must address the issue as to why your cumulative GPA is below the required statement.
- Completion Rate** – If the ratio (hours completed divided by hours attempted) is less than two-thirds (66.67%), your statement must address the issue of enrolling in courses. A course is considered to be successfully completed if the grade status is an A, B, C, D, P, or SP. If you have a course with an ‘I’ incomplete grade, you must indicate your anticipated completion date for this course.
- Timeframe** – If your appeal is based on exceeding the maximum timeframe for receiving financial aid at American University your statement must address the need to enroll in a greater number of credits that is normally associated with the completion of the degree requirements. Please note that a previously completed program (degree earned) does NOT count towards your maximum time frame. However, if you transferred from one program to another (no degree earned), the semesters enrolled for the original program do count towards your maximum timeframe.

Reason for Appeal (indicate all that apply)

- Medical:** If a medical problem contributed to the failure to maintain satisfactory academic progress, attach documentation from a medical professional from whom you have received advice or treatment. Documentation should confirm the illness occurred AND also indicate that you are now able to return successfully to school.
- Death/Illness:** If the death/illness of a family member or close friend contributed to the lack of academic progress, please attach appropriate copies of death certificate, obituary, etc.
- Other Circumstances:** Please clearly state the circumstances in your Typed Statement and provide appropriate documentation.

Plan of Study

Current cumulative GPA: _____ Number of credits completed toward degree: _____
 Anticipated Date of Graduation: _____ Number of credits needed to complete degree: _____

Anticipated enrollment: Please list the courses in which you plan to enroll for the 2017-2018 academic year. Should your appeal be approved, the information provided may be used by the appeals committee to determine the approved appeal requirements for the upcoming semester. If assistance is needed in preparing your plan of study, please contact your academic advisor.

Summer 2017			Fall 2017			Spring 2018		
Course No.	Course Name	Credits	Course No.	Course Name	Credits	Course #	Course Name	Credits
Total Credits:			Total Credits:			Total Credits:		

SAP Appeal Certification Statement

By submitting this appeal, I certify the information submitted is true and correct to the best of my knowledge. I have read each section and provided the required documentation explaining why I could not complete my classes and what will be different about the upcoming semester. I understand that decisions on appeals are processed on a case-by-case basis. If approved, I will be expected to make academic progress in all future semesters. I have read the FA SAP Policy. I understand the completion of this appeal does not constitute an approval of my appeal and I will receive a written notification of the final decision.