



## Satisfactory Academic Progress (SAP) Appeal Cover Sheet

Current Semester You are Enrolled In: \_\_\_\_\_ Last Semester You Attended: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**As a student at Martin University, continued enrollment and eligibility to receive financial aid is contingent upon maintaining Satisfactory Academic Progress (SAP) per the University's SAP Policies (see the Martin University Student Handbook or Catalog for a detailed explanation of the SAP Policy). Also, for purposes of attending Martin University with academic approval only without financial aid you will not have to complete a Financial aid SAP appeal. (you would need a funding source outside of state and federal funding)**

The following chart illustrates a summary of the Financial Aid SAP Policy standards needed to maintain eligibility for federal and state financial aid:

Total Attempted Credit Hours	Minimum Cumulative G.P.A. required	Minimum Cumulative Completion Rate required
1-29 hours (freshman or sophomore status)	1.7	67%
30-123+ (junior or senior status)	2.0	67%
Graduate student	3.0	67%

- This appeal cover sheet must include the following for Financial Aid SAP appeals:**
- A typed personal statement explaining the extenuating circumstances that caused you not to meet SAP standards
  - Provide supporting documentation to support your appeal statement (e.g., obituary, physician statement, hospital paperwork, court documents, etc.) if applicable
  - Explain what has changed and your plan of action to ensure future academic success

By submitting this appeal, I certify the information I have provided is true and complete to the best of my knowledge. I have reviewed the SAP policy and understand that I have not met the University's minimum SAP standards for continued enrollment and/or to receive financial aid. Submission of this appeal is not a guarantee that my appeal will be approved by the SAP Committee. Further, I understand that I must meet the SAP Standards and follow my academic plan to continue to receive Federal and/or State Financial Aid.

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

-----**For SAP Committee Office Use Only**-----

Hours: Attempted \_\_\_\_\_ Earned \_\_\_\_\_ Cum. GPA \_\_\_\_\_ Completion Rate \_\_\_\_\_%

Appeal Status (check one): \_\_\_ Warning \_\_\_ Probation \_\_\_ Suspension \_\_\_ Pending additional information

Comments: \_\_\_\_\_  
\_\_\_\_\_

FAA Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_