

## Instructions for submitting an Appeal for Satisfactory Academic Progress:

1. Complete each section of this appeal form including expected graduation date, major or program, student signature, advisor signature and phone number, and “In-Progress Grades” if submitting after the semester deadline and before the “Special Appeal Deadline.” In-progress grades are required for all students enrolled in the current term appealing after the regular appeal deadline, even if appealing for the next semester’s aid. Submit Pages 2-4 to the Financial Aid Office. Incomplete appeals will be returned.
2. Explain in a **detailed letter the extenuating circumstances** that prevented you from meeting the Satisfactory Academic Progress Policy standards and how these circumstances have been resolved and will not cause problems in the future. Examples of extenuating circumstances include, but are not limited to: unexpected death or major hospitalization of an immediate family member, extended hospitalization or medical condition of student, house fire, victim of a violent crime. Work conflicts are not extenuating circumstances.
3. **Provide copies of any supporting documentation** such as doctors’ letters or bills, death certificate or obituary, or police reports. Submitting an Academic Advising Report is also beneficial, if you have access to this feature on BroncoWeb.
4. Complete, with your academic advisor, the **PLAN OF STUDY on Page 3** of this form. Your plan must indicate the courses and number of credits you will be taking to meet the satisfactory academic progress requirements. If available, you are encouraged to include an Academic Advising Report, an Applied Technology Curriculum Grid, or a page from the Boise State catalog showing the requirements for your program/major.
5. **For Special Appeal Deadline submissions: Have professors provide in-progress grades in the section on Page 4 for each class in which you are currently enrolled. Or, collect and submit letters from each professor and submit the letters attached to the appeal form. The professors need to provide a letter grade for your work completed thus far in the class.**

Semester	Appeal Deadline	Special Appeal Deadline – See Step 5 above
Summer 2009	For the 1 <sup>st</sup> 3-week session – your appeal deadline is May 29, 2009 For summer sessions ending before July 19 – appeal deadline is June 12, 2009 For sessions ending between July 19 & August 16 – deadline is July 16, 2009	
Fall 2009	October 1, 2009	October 30, 2009
Spring 2010	March 1, 2010	April 1, 2010

6. **For Maximum Credit Standard: Submit one of the following documents:**
  - **Undergraduate and Applied Technology students** Print the Academic Advising Report from BroncoWeb.
  - **Graduate Students** Print the Academic Advising Report from BroncoWeb and submit with the completed Admission to Candidacy Form (available from your department).

### Notification of Appeal Results:

After your appeal has been reviewed, you will be notified of the results through BroncoWeb HOLDS and BroncoMail messages.

If your appeal is successful, certain conditions for academic performance will be set and monitored. Further financial aid is dependent on you meeting the conditions for academic performance during the semester for which your appeal was approved. Approved appeals are for one semester only (except for Maximum Credit appeals where the number of credits is specified.) You may experience a delay in receiving financial aid the following term until the Registrar’s Office indicates that grades are “Official.”

Your progress will be monitored each semester until you meet the minimum Satisfactory Academic Standards.

## 2009-2010 Appeal for Satisfactory Academic Progress

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ I.D.#: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_

Federal regulations require that a student receiving financial aid (including federal and state work-study) make progress toward a degree/certificate according to academic progress standards set by Boise State University. These standards are explained in the *Satisfactory Academic Progress* policy that can be found on the web at: <http://financialaid.boisestate.edu/forms/SAPpolicy.pdf>. Students who do not meet these satisfactory academic progress standards are ineligible to receive financial aid.

Federal regulations also allow for exceptions, documented in a written appeal, only when **extenuating circumstances existed** that caused a student to fail to meet one or more of the standards. Examples of extenuating circumstances include, but are not limited to: unexpected death or major hospitalization of an immediate family member, extended hospitalization or medical condition of student, house fire, victim of a violent crime. Work conflicts are not extenuating circumstances.

**Check (✓) the semester for which you are appealing to have your financial aid eligibility reinstated.**

✓	Semester	Appeal Deadline	Special Appeal Deadline – See Step 5 in-progress grades are required for each course
	Summer 2009	For the 1 <sup>st</sup> 3-week session – your appeal deadline is May 29, 2009 For summer sessions ending before July 19 – appeal deadline is June 12, 2009 For sessions ending between July 19 & August 16 – deadline is July 16, 2009	
	Fall 2009	October 1, 2009	October 30, 2009
	Spring 2010	March 1, 2010	April 1, 2010

[If an appeal is submitted during a semester in which you are currently enrolled, your academic performance will still be reviewed at the end of the semester, even if you are not receiving financial aid that semester or you have identified a future semester. Summer is included as one semester.]

### Certification:

- I understand that by submitting this appeal form, approval is not guaranteed.
- I certify the information contained in this Satisfactory Academic Progress Appeal form, supporting documentation and statements, is accurate and complete to the best of my knowledge.
- I will provide other information requested by an authorized official.
- I realize my Satisfactory Academic Progress Appeal form will not be reviewed without this information.
- I understand any false information will be cause for the denial, reduction, and/or repayment of student financial aid.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**Meeting with your academic advisor is a requirement for a financial aid appeal.  
Scheduling an appointment for your academic advisor meeting is strongly encouraged.  
If you have declared a major, call your academic department to schedule an appointment  
and to utilize the advising staff in your academic college.**

If you have not yet declared a major, academic advisors are available in the Gateway Center.

## Plan of Study

Student's Name: \_\_\_\_\_ I.D.#: \_\_\_\_\_

Major or Program: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

### Appealing for Credit Completion:

**Advisor:** Please develop at least one academic year's courses on this **PLAN OF STUDY** with the student. Additional space is provided on the back if you and the student wish to plan beyond one academic year. Comments from you in the space below are very helpful to the appeal review.

### Appealing for Maximum Credits:

**Advisor:** Please indicate **all** remaining semesters and courses, including the credits required for the student to complete his/her program. Please use the additional semesters outlined on the back of this page for a student who requires more than three semesters to complete his/her program. Attach a separate sheet outlining additional semesters and courses if needed.

Fall 20__			Spring 20__		
<u>Course#</u>	<u>Course Name</u>	<u>Credits</u>	<u>Course#</u>	<u>Course Name</u>	<u>Credits</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total # of Credits for Completion of Degree:

Summer 20__		
<u>Course#</u>	<u>Course Name</u>	<u>Credits</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Advisor, please provide comments or attach a letter:**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Name of Major Department of Program

\_\_\_\_\_  
Advisor's Printed Name

\_\_\_\_\_  
Phone #

**Notes: Please review this form to be certain you have completed all necessary sections.  
Make sure you signed the "Certification" on the prior page.**

UGRD	GRAD	<u>Office Use Only</u>			
		Semester of Appeal : Fall _____ Spring _____ Summer _____			
<b>SAP STANDARD NOT MET</b>					
_____ Credit Completion	# Attempted _____	# Completed _____	Completion Rate: _____%		
_____ BSU GPA	BSU Cum _____	GPA Standard _____ ( for Grad Students only)			
_____ Max Time	# Attempted _____	Max # for program _____	# of Credits remaining: _____		
_____ Term Completion Issue: Two or more semesters with financial aid and zero courses completed.					
_____ Second Semester (FST) _____					

**Incomplete forms will be returned.**

