



## Satisfactory Academic Progress (SAP) Appeal Form

Name: \_\_\_\_\_ Student ID # \_\_\_\_\_

Address: \_\_\_\_\_ City, St Zip \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ IVCC Email K \_\_\_\_\_@ivcc.edu

Program of Study (must be actively enrolled) \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_

Semester for which you are requesting reinstatement of your financial aid: (Check one semester only)

\_\_\_\_ Summer 20 \_\_\_\_\_ Fall 20 \_\_\_\_\_ Spring 20 \_\_\_\_\_

If you are appealing to reinstate **military benefits** check here.  GI Bill®  IVG, National Guard, MIAPOW

Students who have lost their eligibility for financial aid due to lack of satisfactory academic progress may appeal for reinstatement of their eligibility **if circumstances beyond their control prevented them from meeting the established standards.**

To appeal, submit all of the items below. Your responses should be provided on separate paper and attached to this form with supporting documentation. **All statements provided must be TYPED.**

1. Provide your own statement describing the reasons and the circumstances that caused you to fail to meet the required standards. It is important that you demonstrate a clear and thorough understanding of why you experienced academic difficulties so that you will be able to take sufficient steps in the future to improve your academic performance and meet the prescribed standards. **Be specific in your explanation since incomplete information may cause a delay in the review of your appeal or a denial of your request.**
2. If you are appealing for more time to complete your approved degree or certificate or you are seeking a second approved degree or certificate, please include a Degree Audit, available from the Counseling Center, that clearly shows how many hours you have remaining in order to complete your degree.
3. Provide a second statement outlining the specific steps you intend to take in the next semester to improve your academic performance. This statement should be thorough and detailed, demonstrating your commitment to achieving the required grade point average and/or percentage of completed credits.
4. **Attach documentation that supports your appeal.** If, for example, the deficiency was caused by medical problems or personal injury, provide supporting evidence from a physician or hospital. Other forms of documentation might include a letter from a counselor or therapist, copy of obituary or death certificate in the case of the death of an immediate family member, etc.
5. If the deficiency was the result of a special academic circumstance, you should attach a statement from an IVCC counselor or other academic personnel that demonstrates that you have sought their assistance in developing a plan of academic support that will assist you in meeting the standards of satisfactory academic progress.

Forms can be submitted by:

Fax: 815-224-0638 | Mail: Office of Financial Aid, 815 N. Orlando Smith Rd Oglesby, IL 61348 | In Person: CTC1015  
Note: Documents submitted via email cannot be accepted due to security reasons. | Office Phone: 815-224-0438

