



2024-25 Satisfactory Academic Progress / Maximum Timeframe 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.

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 66.6% 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 a Staff/Faculty Advisor or Retention Specialist and include an Academic Plan that plans all courses needed to complete the program and supporting documentation.

SECTION A: Student Information

Name: _____ Student ID Number: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: _____

Appeals are processed within 3-5 business days. Students will be notified of the decision (Approved or Denied) by email to their Clark State student email.

SECTION B: Extenuating Circumstance(s)

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

SECTION D: Supporting Documentation

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

- 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 Dashboard, My Aid, View Details

My Pell grant usage is _____% out of 600% Lifetime Eligibility

My subsidized loan amount is \$_____ out of \$23,000.

My unsubsidized loan amount is \$_____ out of \$8,000 for dependent students and \$34,500 for independent students.

Total aggregate loan limit is \$31,000 for dependent students and \$57,500 for independent students.**SECTION F: Confirmation of academic advising meeting to discuss student's academic plan.**

Staff/Faculty Advisor Name: _____ Signature: _____ Date: _____

 Attach Academic Plan

Academic Program: _____ Catalog Year: _____ Credit Hours to Complete: _____

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:** _____**Acceptable signature formats include hand-written signatures, signatures made using a stylus or finger or an image representation of your signature.****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 Second Appeal): _____ Date: _____

 Appeal Approved Appeal Denied Appeal Pending