



## **Title IV Federal Student Aid Satisfactory Academic Progress Appeal Fall Semester 2016**

### **Policy**

A student must maintain satisfactory academic progress in accordance with the West Chester University Financial Aid Satisfactory Academic Progress (SAP) policy to be eligible to receive federal aid (Title IV). These programs include Pell grant, TEACH grant, Stafford Direct student loan, Perkins loan, Nursing loan and PLUS. The qualitative (grade-based) and quantitative (time-based) measures required by the U.S. Department of Education are as follows:

- 1. You must successfully complete at least 67% of all credits attempted when progress is evaluated by the University each spring semester**
- 2. You must earn a cumulative 2.00 GPA by the end of the fourth semester of enrollment and in each subsequent year of enrollment**
- 3. You must not exceed 180 cumulative credits, which is 150% of cumulative undergraduate credits required to graduate**

Any student who does not meet the satisfactory academic progress requirement is notified and has the option to appeal. The submission of an appeal application DOES NOT GUARANTEE the reinstatement of cancelled aid. **You are strongly encouraged to make payment arrangements with the Bursar's Office while your appeal is being considered, as billing deadlines are not adjusted.**

***The Pennsylvania Higher Education Assistance Agency has separate progress requirements and appeal process which can be found on the University website and at [www.pheaa.org](http://www.pheaa.org)***

### **Instructions**

Complete the entire appeal application as instructed throughout the packet.

Examples of acceptable circumstances that may warrant an appeal include:

1. The death of an immediate family member (parent, spouse, sibling, child)
2. Serious illness of the student that may have necessitated withdrawal from all classes in order to recover, or that may have contributed to the student doing poorly in his/her classes
3. Serious illness or injury of an immediate family member for whom the student was a caregiver
4. Significant trauma in the student's life that impaired his/her health
5. Other documented unexpected circumstances beyond the student's control

### **Process:**

1. Complete appeal form in full.
2. Student must make an appointment to meet with a financial aid counselor to review the completed appeal application and documentation
3. If the appeal application is not complete, it will be returned to the student for completion and another appointment with the counselor will be made
4. The financial aid counselor will approve the appeal or defer decision to the Appeal Committee
5. Please allow up to 7 business days if a decision is deferred to the Appeal Committee

### **Results:**

The student is notified in writing regarding the result of the appeal request:

1. If the appeal is approved, then financial aid will be awarded for **one semester or payment period**
  - a. Academic progress will be reviewed after the appealed semester; financial aid will not be approved for any future semester until progress is met, unless otherwise approved by the counselor after grades are reviewed
2. If the appeal is denied, the student may enroll but is responsible for any balance owed to the University

**Federal Student Aid Satisfactory Academic Progress  
Appeal Application – Fall 2016**

***DEADLINE FOR APPOINTMENT AND SUBMISSION:  
September 6, 2016***

Name \_\_\_\_\_ WCU I.D. Number \_\_\_\_\_

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

Have you ever previously submitted a financial aid appeal? \_\_\_\_\_  
If yes, when? \_\_\_\_\_

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**Section 1: Satisfactory Academic Progress (SAP) Requirements**

**Satisfactory Academic progress was not met because:**

- ☐ I did not complete 67% of the total cumulative attempted and transfer credits, including any credits for which I remained enrolled past the Drop/Add period (attempted credits include credits for which a grade of **W, F, AU, Z** or **NG** has been received)
- ☐ I do not have a cumulative grade point average (GPA) of at least 2.00 at the end of the fourth (4<sup>th</sup>) term (includes winter and summer sessions)
- ☐ I have attempted more than 180 cumulative credits –***complete sections 1, 3, and 6 only***

## **Section 2: Circumstance for Appeal**

**NOTE:** *Lack of awareness of the Financial Aid Satisfactory Academic Progress Policy is not a sufficient reason to apply for an appeal*

**Check the category or categories that pertain (s ) to your circumstance:**

- ☐ **The death of an immediate family member (parent, spouse, sibling, child)**  
Attach a photocopy of death certificate or notice; state the relationship of the deceased to you in Letter of Circumstance
- ☐ **The serious illness or injury of the student**  
Attach a statement from a physician and or counselor or hospital discharge note; explain the nature and dates of the illness or injury in Letter of Circumstance
- ☐ **The serious illness or injury of immediate family member**  
Attach a statement from a physician or a hospital discharge note; explain the nature and dates of the illness or injury in Letter of Circumstance
- ☐ **Significant trauma in the student's life that impaired the student's emotional and/or physical health**  
Provide documentation from a physician, counselor or third-party professional; details must be fully explained in Letter of Circumstance
- ☐ **Other unexpected documented circumstances beyond the student's control**  
Provide documentation from third-party professional and fully explain situation in Letter of Circumstance

## **Section 3: Letter of Circumstance**

- a. The Letter of Circumstance must be typed or written on a separate page and attached to this form
- b. Describe, in detail, how the events in Section 2 impacted your academic performance and prevented you from making satisfactory progress
- c. Describe other responsibilities you have while attending WCU
- d. Describe, in detail, how the circumstance is now resolved and explain the measurable steps you are currently taking to prevent the situation from negatively impacting your academic performance in the future

#### **Section 4: Academic Improvement Plan for Financial Aid Eligibility—Advisor Section**

Satisfactory academic progress is required by federal law for students seeking financial assistance. The West Chester University Financial Aid Office is committed to engage students with appropriate services to help ensure academic success and continued financial assistance. **This form should be completed by the advisor in tandem with the student, signed by the advisor, and submitted with the financial aid appeal packet at the student's appointment with a financial aid counselor.** The information in the improvement plan below will help the financial aid counselor assess the student's eligibility for an appeal and future academic success.

#### **Student Information**

Name: \_\_\_\_\_ ID# \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_ # Credits Needed to Graduate \_\_\_\_\_

#### **To be Completed by Academic Advisor:**

1. Student's current cumulative GPA \_\_\_\_\_
2. Student's anticipated graduation date: \_\_\_\_\_
3. Is the student currently on academic probation? \_\_\_\_\_
4. Semester student began to experience academic difficulty \_\_\_\_\_
5. Does the student have an academic renewal plan? \_\_\_\_\_
6. Has the student previously met with you to discuss academic goals? \_\_\_\_\_
7. If yes, what specific goals have the advisor and student made to encourage academic success?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. If no, when will the advisor and student meet to discuss academic goals and success? \_\_\_\_\_
9. Has the student used the LARC or other academic resources (please describe) \_\_\_\_\_  
\_\_\_\_\_
10. Advisor's Comments:  
\_\_\_\_\_  
\_\_\_\_\_
11. Advisor's Printed Name: \_\_\_\_\_
12. Advisors' Signature/Date: \_\_\_\_\_  
\_\_\_\_\_/\_\_\_\_\_

**Section 5--Student Certification—Appeal will not be reviewed until this section is complete**

Student must initial each item (appeal will NOT be reviewed until this is complete)

\_\_\_ I understand that the reason that I am not making SAP is that I either did not successfully meet the 67% cumulative completion rate, or that I did not meet the required cumulative 2.00 GPA requirement

\_\_\_ I certify that all information and documentation in this appeal packet is true, accurate and complete

\_\_\_ I understand that providing false, incomplete or inaccurate information is a dishonesty violation of the West Chester University Code of Conduct, and that my appeal will be denied

\_\_\_ I understand that financial aid records, academic records and conduct records on file at West Chester University will be reviewed by the Financial Aid Counselor/Appeal Committee

\_\_\_ I understand that if approved, I will receive federal financial aid for one semester ONLY

\_\_\_ I understand that if the appeal is approved, I must successfully complete 100% of all credits attempted in the appealed semester (grades of F, Z, W, AU and NG are not considered “successfully” completed) or I will not receive aid in the next semester after the appealed semester; I further understand that if it is determined that I will need more than one semester to re-establish SAP, that I must submit an Academic Recovery Plan (ARP) from my academic advisor to the Financial Aid Office, and that my eligibility for aid in the semester after the appealed semester will be determined by the financial aid counselor.

\_\_\_ I understand that I may appeal a second time only for a reason NOT related to the circumstances of the first appeal

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

**Section 6—For Student Exceeding the 180 Credit Limit ONLY:**

Your academic advisor MUST complete and sign this section before you submit the appeal to the Financial Aid Office.

**Academic Advisor:** The student is meeting or exceeding the maximum allowable time frame to complete his or her degree. The student must, therefore, appeal for an exception to the Financial Aid Satisfactory Academic progress (SAP) policy. Please evaluate the student's degree audit and provide the information as requested below:

Number of credits needed for graduation: \_\_\_\_

Number of semesters required to complete degree: \_\_\_\_

Anticipated graduation date: \_\_\_\_

Advisor Name (Please Print): \_\_\_\_\_

Advisor E-mail: \_\_\_\_\_

Advisor Signature/Date: \_\_\_\_\_/\_\_\_\_\_

**Student Certification:**

I certify that all information and documentation in this application is true, accurate and complete. I understand that submitting false, incomplete or inaccurate information is a dishonesty violation of the West Chester University Code of Conduct and that my appeal will be denied. I agree with the information provided by my academic advisor and will adhere to the schedule of credits taken to complete my degree. I further understand that my academic progress and plan will be reviewed at the end of the appealed semester and a new academic plan from my advisor must be submitted to the Financial Aid Office if there is any deviation from the plan or if a grade of F, W, Z, NG or AU is received during the appealed semester. I understand that a financial aid counselor may request an interview to discuss the academic plan or academic progress.

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

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