The University of Scranton
FINANCIAL AID SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FORM
STUDENT INSTRUCTIONS

The Financial Aid Office has established an appeal process and a committee to review all financial aid appeals related to Financial Aid Satisfactory Academic Progress (SAP). Any student who wishes to appeal his/her ineligible status for financial aid due to SAP must read the “Satisfactory Academic Progress Policy”. The Satisfactory Academic Progress Policy is published in the University’s Comprehensive Guide to Financial Aid located on the University’s website under financial aid publications and a paper copy is also available in the Financial Aid Office. Please read carefully the instructions below on how to complete the attached Satisfactory Progress (SAP) Appeal Form.

DEADLINE: An appeal form with all appropriate documentation must be submitted no later than 30 days before the start of the semester for which the student aid is being requested (Contact the Financial Aid Office for specific dates.) Appeals submitted after this date will not be considered.

PROCEDURE: In order to submit an appeal, you must:

- Complete appropriate items on the appeal form. You must enter the semester and/or term that you appealing to receive financial aid.
- Attach documentation to clarify/support your appeal.
- Submit your appeal to the Financial Aid Office at the address or fax number provided. All applicants will receive a written response as soon as possible, but no later than 10 business days after submitting all necessary forms.
- If an Academic Plan is required, your appeal will be forwarded to the Dean’s Office and you must contact the Dean’s Office to schedule an appointment to meet with your academic advisor or dean’s office representative to discuss your appeal and academic plan.

GUIDELINES for appealing:

- Be specific when explaining your circumstances. Lack of information or documentation will result in a delay of an appeal review, or may result in denial of your appeal.
- The appeal committee assumes that each student appealing is dependent upon financial aid for the completion of his/her degree. Please do not discuss your need for financial aid in your appeal.
- If you are unclear as to why you no longer meet satisfactory academic progress standards for financial aid, or if you have questions about completing the appeal form, contact the Financial Aid Office.

Please complete all appropriate items on the entire appeal form. Incomplete appeals will not be reviewed and will be returned to the student. This document is two (2) pages in length.

NOTE: If you have been suspended from the University, this appeal will not result in an academic reinstatement. A separate appeal process is necessary. Please contact the office of your College’s Dean for more information on reinstatement to your program of study.
The University of Scranton
FINANCIAL AID SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FORM

Part 1: Student Information

Name: _____________________________________________ Royal ID# __________________
Address: ________________________________________________________________________
_________________________________________ _______________________________

Email: __________________________________   Phone: _______________________________

Indicate for what semester/term you are appealing to receive financial aid (CHECK ONE):

FALL _________ SPRING ___________ SUMMER___________

PLEASE READ the “Satisfactory Academic Progress Policy” in the Comprehensive Guide to Financial Aid Programs in its entirety before submitting your request to appeal. Please note you may be required to submit an academic plan signed by you and your Academic Dean.

Part 2: Student’s Appeal Form

Please indicate the mitigating circumstance(s) that contributed to your inability to maintain Financial Aid Satisfactory Academic Progress (SAP) by checking any category that applies to you. You also must follow the instructions for each checked category.

___ Serious Illness or injury to you or immediate family member (parent, spouse, sibling, or child) that required extended recovery time. Attach a statement from the physician and provide an explanation in your letter of appeal regarding the nature and dates of the illness or injury. (See below in Part 3.)

___ Death of an immediate family member. Include the name of the deceased and relationship to you in your letter of appeal. (See below Part 3.)

___ Significant trauma that impaired your emotional and/or physical health. Provide a detailed explanation in your letter of appeal regarding the specific circumstances of your condition. Please be sure to include dates and what you have done to overcome this condition. Supporting documentation from a third party (physician, social worker, psychiatrist, police, etc.) must also be attached. (See below Part 3.)

___ Other: please provide a detailed explanation in your letter of appeal along with supporting documentation. (See below Part 3.)

PART 3: Student’s Letter of Appeal

You must also submit a letter explaining the reason for your appeal. If your appeal is due to your lack of academic progress in past semesters, you should (a) provide a detailed account of your circumstance for each of those semesters; and (b) discuss what changes you have made to ensure your academic success, should your appeal be approved. If you have any supporting documentation, please submit the supporting documentation along with the letter of appeal and this form.

Please return the forms and supporting documentation to:

The University of Scranton
Financial Aid Office
401 St. Thomas Hall
800 Linden Street
Scranton PA 18510
Fax (570)941-4370 E-mail: finaid@scranton.edu