

Purpose

This form should be completed by students who have lost all financial aid eligibility because they did not meet the requirements for Satisfactory Academic Progress (SAP) and who wish to request an extension of financial aid eligibility. This appeal should be submitted along with any required documentation detailing the extenuating circumstances that contributed to you not meeting the requirements for SAP.

Student Information

Last Name

First Name

Social Security Number

Phone Number

Date of Birth

WJU ID Number (last 4 digits)

Appeal Information

When do you plan on completing your degree program?	<input type="text"/>
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Which semester did you lose financial aid eligibility?	<input type="text"/>
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What semester are you requesting financial aid eligibility for?	<input type="text"/>
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Briefly state your educational objective and/or goals.
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Please explain the reasons why you are not achieving satisfactory academic progress. Explain and document any special circumstances which made it difficult for you to succeed in your classes. Attach any supporting documents.
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Appeal Information (continued)

Please explain how you plan to succeed in your classes from now on. Include specific steps you intend to take in the next semester to improve your academic performance.

Signature

By signing this form, I certify that I have read, understood, and accepted the conditions of this appeal. I also affirm that the statements made above and contained in supporting documentation is true, accurate and complete.

Student's Signature (required)

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Date

Academic Advisor Comments

Financial Aid Office Use Only

Approved Denied

Notification of decision sent ____/____/____

Comments: _____

Financial Aid Administrator's Signature

Date