

# BRCC Financial Aid Satisfactory Academic Progress Appeal: 2017-2018

## Instructions:

Federal regulations state that students may only be allowed to continue receiving financial aid if they are making satisfactory progress toward the completion of their academic program. This is reviewed by measuring each student's GPA, rate of completion of their courses, and timeframe of completion of their program. You may find the full SAP policy at [http://www.brcc.edu/financial\\_aid/fin-aid-policies/sap](http://www.brcc.edu/financial_aid/fin-aid-policies/sap).

You may use this form to appeal for reinstatement of your financial aid eligibility under a probationary set of guidelines referred to as an "Academic Plan." Appeals are considered if you were unable to meet the minimum requirements due to an unusual circumstance beyond your control. **SUBMISSION OF THIS APPEAL DOES NOT GUARANTEE APPROVAL. You will be notified at your VCCS e-mail address of the appeals committee's decision.**

**Please complete this form in its entirety.** Incomplete forms will be returned unprocessed. If you do not know your Student ID number, instructions for looking it up can be found at <https://www.brcc.edu/services/computing/mybrcc-support/index.html#emplid>. **This form must be submitted no later than the last day to add classes for each enrollment period.** Please refer to the college catalog for the last day to add courses for your enrollment period.

**Late submissions will be considered for the following semester.**

**Appeals without documentation will not be considered.**

## Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
Student ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

*Please indicate the semester for which you wish to appeal:*

Summer 2017       Fall 2017       Spring 2018       Summer 2018

*Please indicate the type of appeal you are submitting. Check all that apply; refer to the to-do list on your Student Center if you are unsure which box to check:*

- GPA** – Check this option if your GPA is below the minimum required GPA described in the [SAP Policy](#)
- Completion Rate** – Check this option if you have completed less than 67% of the coursework that you have attempted with a passing grade.
- Timeframe Exceeded** – Check this option if you have attempted more than 150% of the number of credits required to complete your current degree or certificate program.

*Please indicate your reason for appealing. Check all that apply; please keep in mind that appeals without documentation will not be considered.*

- Personal illness or illness of immediate family member.** Please attach medical records, such as a statement from a physician regarding treatment, hospital records, or other third-party documentation of illness.
- Death of immediate family member.** Please attach a copy of the obituary, death certificate, or other third party documentation
- Other unusual mitigating circumstances.** Please provide written explanation and supporting documents such as court records, police records, letters from counselors or other unbiased third parties, etc.

**Please indicate how many credits remain to complete your degree or certificate:** \_\_\_\_\_

If you do not know how many credits you need, please log in to your MyBRCC Account and access your Student Center. Under the heading "Academics," choose "Academic Requirements" in the drop down box and click the double arrow to the right of the box. This will display the hours needed to complete your program.

Please provide a detailed explanation of the factors contributing to your inability to maintain Satisfactory Academic Progress (SAP). You may attach a typed statement in lieu of a written one below (preferred). Attach additional sheets if necessary.

Your statement should include a detailed **description of the circumstances** beyond your control that led to failure to meet SAP as well as a statement indicating **what has changed** that will prevent this situation from affecting future performance. Appeals cannot be approved for unresolved situations without solid evidence that the situation will not affect your academic performance.

**Students who have completed the Student Success Workshop and met with an Academic Success Advisor should attach their Personal Learning Contract.**

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### SAP Checklist and Authorization/Signature

Please check each of the following items to indicate that you agree to each of the following, then sign below.

- I have read this form in its entirety and believe that my situation warrants appeal for financial aid reconsideration.
- I have met with an academic success advisor and attached my academic contract that resulted from that meeting (not required for 150% Timeframe Exceeded).
- I have completed the information requested on page one of this form, including indicating the number of credit hours required for the completion of my program.
- If approved, I agree to be placed on an "academic plan" which will require that I maintain a 2.5 GPA or higher and a 100% completion rate (meaning you may not receive a grade of "F," "W," "U," or "I" in any course) until such time as I have achieved the minimum SAP requirements.
- I understand that if my appeal is approved, additional appeals will not be considered without **new** mitigating circumstances if the conditions of my academic plan are not met.
- I understand that if my appeal is approved, additional appeals will not be considered without **new** mitigating circumstances if the conditions of my academic plan are not met.
- I have attached relevant documentation to support my appeal.
- I understand that appeals are decided on a case-by-case basis by committee and that submission of this form does not guarantee approval of my appeal

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

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