



Financial Aid Satisfactory Academic Progress Appeal for Maximum Time Frame Suspensions

Instructions:

Students who need to appeal SAP for GPA or Completion Rate suspension should use the link in their SIS To Do List to the electronic SAP Appeal form.

This SAP appeal form is ONLY for students who are not meeting the 150% requirement having exceeded the maximum time frame for their program. Federal financial aid is designed to assist students who are pursuing a specific degree. Financial Aid is suspended for students who have attempted 150% of the credits required for their program and have not finished the program. In certain circumstances, students may be able to appeal in order to receive financial aid for the duration of their program as long as they maintain specific progress standards.

Federal regulations state that students must be making satisfactory progress toward the completion of their academic program in order to continue receiving financial aid. BRCC's complete SAP policy can be found at brcc.edu/financial-aid/fin-aid-policies/sap/.

Students may complete and submit the appeal form, requesting consideration that their financial aid eligibility be reinstated. If approved, the student is placed on a probationary set of guidelines referred to as an "Academic Plan." Appeals are considered if a student was unable to meet the minimum requirements due to mitigating circumstances beyond their control. **Submission of this appeal does not guarantee approval.** Once the committee makes a decision a message is placed in your message center, and an email is sent to your VCCS student email notifying you the message is there.

You must complete this form in its entirety. Incomplete forms will be returned unprocessed. Instructions for looking up your student ID number are found at brcc.edu/student-support-services/computing/my-brcc-support/. **The deadline for submitting this form is 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.

Student Information

Last Name: _____ First Name: _____ Middle Initial: _____

Student ID: _____ Date of Birth: _____ Phone Number: _____

For which semester are you appealing? Semester: _____ Year: _____

Please indicate one or more reasons for your appeal (note that you must provide an explanation below):

- ☐ **Additional Program:** I have completed one or more associate or higher degrees and am returning to complete an additional associate degree or an additional certificate.
- ☐ **Illness of yourself or a 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 relevant documentation.

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,” select “Academic Requirements” in the dropdown box and click the double arrow to the right of the box. This will display the hours needed to complete your program.

Statement:

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. Attach additional sheets if necessary.

Failure to complete this statement will result in denial of your appeal.

Your statement should include a detailed description of the circumstances leading to you having attempted 150% or more of your academic program. Appeals for circumstances other than additional degrees/certificates cannot be approved for unresolved situations without solid evidence that the situation will not affect your academic performance.

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 completed each section of this form, including indicating the number of credit hours required for the completion of my program and an explanation of circumstances.
- 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 completed my program.
- I understand that if this appeal is approved, adding programs after approval will nullify the agreement and I will become ineligible for financial aid.
- 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.
- If applicable, 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

Please note: We must have a physical or mouse drawn signature. Typed signatures are not accepted.

Student Signature:

Date: _____