



Financial Aid Satisfactory Academic Progress (SAP) Appeal Form and Academic Plan of Action (APA)

A. Student's Information – DO NOT LEAVE ANYTHING BLANK (Please Print)

Last Name	First Name	M.I.	Student ID
Phone Number		Email	

The federal government mandates that students make Satisfactory Academic Progress (SAP) toward a degree or certificate in order to maintain financial aid eligibility. SAP is measured each term by qualitative (grade-based) and quantitative (completion rate) standards, and maximum time frame. Any student who wishes to appeal his/her ineligible status for financial aid due to SAP should read and complete this form. The Financial Aid Director will review all financial aid appeals related to SAP.

B. Indicate Why You Need to Appeal – Mark all that apply

- Qualitative measure** – Student's cumulative GPA did not meet the required 2.0
- Quantitative measure** – Student did not successfully complete 70% of all classes they attempted.
- Maximum time frame** – Student is close to exceeding or has exceeded 150% of the published length of the academic program of study.

C. Instruction for SAP Appeal Process

Letter – Attach a typed and signed letter to this Financial Aid Appeal form documenting clearly the extenuating circumstances that hindered you from meeting SAP, and the ratification of these circumstances noted below. Your appeal letter and supporting documents are kept confidential.

Supporting Documentation – You are **required** to include documentation confirming the circumstances that created the lack of SAP. Examples of extenuating circumstances may include, but are not limited to: death of an immediate family member, accident, illness, or hospitalization. For a more extensive list with required documentation refer to Northern's SAP policy on the Financial Aid homepage at www.nnmc.edu.

D. Decision Time-Frame and Notification

Please allow 2 weeks from receipt of your completed appeal for the Director to carefully review your appeal. You will be notified of the decision by mail.

E. Instructions for Academic Advisor regarding the APA

Students who have not met SAP standards (as defined in section B) are required to establish an Academic Plan-of-Action (APA). Please assist the student in developing a realistic APA, and ensure that the coursework listed is **required** for the student's declared program. When determining the APA also consider the student's past academic performance and expected enrollment. If it will not be mathematically possible for the student to make SAP at the end of the next semester, the student will be required to complete an APA calculating the number of semesters that it will take for the student to meet SAP eligibility. Once the plan is developed and agreed upon (attach a degree check sheet for 150% timeframe APA ONLY), sign and date the APA. The student cannot receive financial aid without an APA. If you have questions concerning the SAP policy, please contact us at 747-2128.

Degree student has declared: _____

Expected Graduation Date: _____ Current Cum. GPA: _____ Current Cum. Hours Completed: _____

Academic Plan Semester 1

Term: _____

Course Number	Course Name	Credit Hours

Academic Plan Semester 2

Term: _____

Course Number	Course Name	Credit Hours

Academic Plan Semester 3

Term: _____

Course Number	Course Name	Credit Hours

Academic Plan of Action Projected End Date: _____

By signing below I understand that I am responsible for reading and understanding Northern’s Satisfactory Academic Progress (SAP) policy as outlined in Northern’s catalog and website. I certify that the information provided on this appeal request form has been written and provided by me, the student, and is accurate and complete. I acknowledge that it is a violation of Northern’s student code of conduct for another person to complete and/or submit this form on my behalf. I further understand that all decisions are final. I understand that if my appeal is pending and if I am enrolled in the next subsequent term after I failed to meet the SAP standards I will be required to make immediate payment arrangements with the Cashier’s office (including tuition and fees and any bookstore charges incurred). If my appeal is accepted, I understand that I must abide by the approved APA or have financial aid suspended.

Student’s Signature

Date

Advisor’s Name

Date

Advisor’s Signature

Date

FOR FINANCIAL AID OFFICE USE ONLY

SAP Appeal – Please review this information and submit your recommendation to the Financial Aid office.			
Director Signature	Approved or Denied	Date	Comments