

Student Name:

## **Satisfactory Academic Progress Appeal Form**

Hope College ID Number:

Federal regulations require that students make Satisfactory Academic Progress (SAP) towards the completion of their degree and maintain good academic standing. Students who fall behind in their coursework, or fail to achieve minimum standards for grade point average and completion of classes risk losing their eligibility for financial aid.
A student may appeal the suspension of aid eligibility if there were extenuating circumstances that prevented normal academic progression. Examples of extenuating circumstances include a personal or immediate family member serious illness (physical or mental), death of an immediate family member, pending incomplete grades or withdrawal from classes after the drop/add period.
By submitting this form and supporting documentation you are explaining your deficiency and requesting consideration for reinstatement of your financial assistance.
<ul> <li>Please attach a personal statement describing the reasons and circumstances surrounding your insufficient academic progress. Your personal statement must address the following questions:</li> <li>What circumstances have caused you to lose your eligibility for financial aid?</li> </ul>
<ul> <li>What specific steps have you taken and/or what steps will you take in order to be successful?</li> </ul>
<ul> <li>In addition to a personal statement, you must attach the following materials in order for your appeal to be considered complete: <ul> <li>Your unofficial academic transcript (plus.hope.edu - Registrar &amp; Student Accounts - Student Records)</li> <li>Supporting documentation based on your specific situation. Examples include: <ul> <li>A letter of support from your academic advisor if you have been working with one</li> <li>A letter from your doctor or counselor if you have been working with one</li> <li>A copy of a death certificate/obituary if you have experienced the death of an immediate family member</li> <li>A copy of your grades if you have attended another institution since your last semester at Hope College</li> </ul> </li> </ul></li></ul>
<ul> <li>Review the SAP policy – sections 1 and 2 - (hope.edu/offices/financial-aid/policies.html) to determine your required GPA and required completion rate. Provide your academic information below: <ul> <li>Your anticipated graduation date</li></ul></li></ul>
Student Signature: Date Signed:
(signature must be in ink)