Office of Student Financial Assistance

2022-2023 SAP Appeal Form

Federal and institutional policies require that students maintain satisfactory academic progress (SAP) in order to remain eligible for student financial assistance at GW. There are both a qualitative and quantitative standard for satisfactory academic progress including, semester and cumulative grade point average, credit hour completion rate, and the maximum time frame allowable for completion of an academic program as a recipient of Federal student financial assistance. The specifics of the policy can be found on our website https://financialaid.gwu.edu/satisfactory-academic-progress. This appeal form should be used by students who have lost eligibility for financial assistance following a semester on Financial Aid Warning status to initiate a SAP Appeal to be placed on Financial Aid Probation and receive financial assistance for one semester. After a Financial Aid Probation, students must either meet SAP requirements or fund educational expenses without the use of financial assistance.

Submit all required documentation with this form:

- **Letter from the student** explaining the circumstances that led to the current academic status
- **Supporting documentation** from unrelated adults attesting to circumstances (see each reason for specifics)
- **Statement from the student** detailing the types of academic support the student will engage in (e.g. tutoring, checkpoints with professors and/or time management skill building)

GW Student Last Name _____ First Name _____ MI _____ GWid _____

REASON FOR APPEAL - Indicate the reason(s) for appeal below. Attach a letter explaining the circumstances that led to your current academic status and suggested supplemental documentation when submitting this form.

- ☐ Injury / Illness – letter or records from medical practitioner which include date of injury or duration of illness.*
- ☐ Death of family member – copy of obituary or death certificate
- ☐ Mental Health Crisis – letter or records from a mental health professional. *
- ☐ Other (Please specify in a separate letter) – supporting documentation as appropriate.

** Note that documentation does not need to include the details of your diagnosis or treatment plan but should indicate that there was a significant impact on your ability to function as a student. All supporting documentation should be from unrelated adults such as professors, academic advisors, clergy members, doctors or mental health professionals.*

ACADEMIC PLAN - The academic plan which is developed in conjunction with and reviewed by your academic advisor should provide a path to follow that will ensure academic success.

Enrollment Plans – student will be enrolled in the following courses during the _____ semester. (Note that a copy of the Degree Map can be substituted for this section).

Course	**Credits**
Total Credits for Semester	

I agree to the plan above (and detailed attachments). I fully expect that if followed, I will meet all satisfactory academic progress requirements by the close of the following semester.

Student Signature _____ Date _____