Financial Aid Office

800 West Main Street Whitewater, WI 53190 www.uww.edu/financialaid p 262-472-1130 f 262-472-5655 uwwfao@uww.edu

Satisfactory Academic Progress (SAP) Appeal Form

In order to receive financial aid, students must comply with the three eligibility standards of satisfactory progress: qualitative (cumulative GPA), quantitative (% of attempted credits completed), and maximum time frame. Students not meeting one or more of these standards are ineligible for financial aid until they again meet the standards. If students have experienced circumstances beyond their control that caused them not to meet these requirements, they may appeal the loss of their financial aid following the process outlined on this form. Additional information regarding SAP may be found here: https://www.uww.edu/financialaid/policies/academic-progress.

Please thoroughly review this form and submit all of the required materials for your appeal to the UW-W Financial Aid Office (via email, mail, or fax – addresses and numbers listed at the top of this form) in the following order: SAP Appeal Form, Personal Statement, and then Supporting Documentation.

If you have been academically dismissed, this appeal for Satisfactory Academic Progress does NOT replace the need to submit an academic appeal through the Academic Standards Office.

Step 1: Student Data

Student Name:			Student ID#:			
l	_ast	First	MI			
Home Address:				Phone:		
9	Street	City	State ZIP Code			
Select the degree	you are pursing:					
□ Undergraduate	☐ Graduate	☐ Special				
Please select the t	erm for which you are appea	aling to have your fina	ncial aid eligibility reins	tated and enter the year:		
☐ Fall of	(due November	1)				
☐ Spring of	(due April 1)					
☐ Summer of	(due July 1)					

Step 2: Personal Statement

Please create a Word document to answer the following questions (include both your name and UW-W Student ID in the document). The Personal Statement is your opportunity to explain the circumstances that require this appeal. Personal Statements remain confidential. (Note that handwritten statements will not be accepted.)

- 1. Explain the extenuating circumstances that prevented you from meeting the minimum credits, exceeding maximum number of credits and/or cumulative GPA required for maintaining financial aid eligibility. Include relevant dates.
- 2. Indicate what circumstances have changed that will allow you to maintain financial aid eligibility for the requested and future terms of enrollment. What changes have you made to ensure that you will successfully complete the required credits and/or GPA needed to maintain satisfactory progress in the future?

Please note that you must answer both questions. Personal statements that do not answer both questions will not be approved. In addition, handwritten personal statements will not be approved.

Step 3: Documentation

In addition to checking the appropriate box(s) on the next page, you will need to provide third-party documentation to support your appeal. Examples of third party-documentation you may submit are listed after each circumstance on the next page. In addition to those examples, third-party documentation may include a **signed** and **dated** letter from someone who is familiar with your situation and can support the reason for appeal (clergy, social worker, case worker, counselor, doctor, etc.). *Please note that your Personal Statement described in Step 2 does not satisfy the third-party documentation requirement.*



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Step 3: Documentation (Continued)

Please indicate below the circumstance(s) beyond your control that contributed to your inability to maintain the SAP standards.

☐ Work Related	☐ Required overtime, required schedule change		Letter from employer including effective dates(s) and whether the increase in hours was mandatory
	☐ Reduced hours resulting in increased childcare need, layoff, job loss	•	Letter from employer Separation letter
			·
☐ Medical or Mental Health Concern	☐ Serious illness or change in health status		Letter from doctor Record of doctor visits
Treater concern	☐ Surgery/hospitalization	•	Letter stating doctor advised period of recovery Record of doctor visits Hospitalization records Copies of medical bills documenting illness/injury
	☐ Mental health concern	•	Letter from doctor, therapist or counselor
	☐ Dental emergency	•	Record of dental visits Letter from dentist Letter stating dentist advised period of
			recovery
☐ Dependent Care Issue	☐ Dependent's Medical Condition	•	Records from doctor visits Letter stating doctor advised period of recovery Hospitalization records
	☐ Dependent-care Issue	•	Letter from former care provider Letter from new care provider
□ Other	☐ Death of a Loved One	•	Obituary Funeral program Letter from counselor Documentation should include date and indicate relationship to the deceased Death Certificate
	☐ Housing Insecurity/Eviction	•	Eviction notice Letter from transitional housing program
	☐ Assault/Domestic Violence	•	Police report Court documentation Letter from clergy, social worker, counselor, doctor
	□ Other	•	A signed and dated letter from someone who is familiar with your situation and can support the reason for appeal (clergy, social worker, case worker, counselor, doctor, etc.)



to submit an academic appeal through the Academic Standards Office.

Student Signature

 \square I am aware that campus resources are available to assist with my academic and personal success.

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Student Name:		Student ID#:				
Last	First	MI				
Student Resources						
services. • The UW-W <u>Campus Tutorial Ser</u>	essful. Below is a list of sor with Disabilities can assist you Counseling Services can assist you with acase can assist you with acase can assist you can as	ne common student reso ou with any required aca ssist you with health, we ademic assistance. sist you with proactive ar	urces you may wish to explore. Idemic accommodations. Ilness, and mental health counseling Ind developmental academic advising.			
Step 4: Certification						
By signing below, you agree to the follow	ring (check off each bullet):					
\square I have submitted a complete SAP Appel documentation.	eal form, including this signe	d form, my typed Persor	al Statement, and third-party			
$\hfill\Box$ If I am submitting an appeal due to no Degree Plan.	t meeting the Maximum Tir	ne Frame requirement, I	have submitted a completed SAP			
☐ I understand that it can take several waccount while this appeal is being review		viewed and that I am res	sponsible for any charges due to my			
☐ By signing this worksheet, I certify tha give false or misleading information on the		-				
☐ I understand the UW-W Financial Aid information on this form is inaccurate.	Office may request addition	al documentation if they	have reason to believe any of the			

☐ I understand that if I have been academically dismissed, my appeal for Satisfactory Academic Progress does NOT replace the need

Date