SAIC Financial Aid Satisfactory Academic Progress (FASAP) Appeal Form for Federal Financial Aid Eligibility Instructions

A student who is suspended from receiving federal financial aid due to failure to meet Financial Aid Satisfactory Academic Progress (FASAP) requirements may appeal his/her suspension.

Appeal Procedures

A written letter of appeal must be submitted by the student to the Student Financial Services Office for review.

1. It is recommended that the student meet with a Student Financial Services Advisor to discuss the appeal process.

2. The appeal must explain:
   a. why the student failed to make satisfactory academic progress (i.e., injury, or illness (physical or mental), death of a relative, or other circumstances), and
   b. what has changed that will allow the student to make satisfactory academic progress by the next review period.

3. Appeals must be submitted no later than one week prior to the start of the next semester for which the student is requesting to receive financial aid.

4. Depending on the circumstances the appeal will be reviewed by the Student Financial Services staff in consultation with Academic Advising or the Satisfactory Academic Progress Committee. The Satisfactory Academic Progress Committee will consist of the representatives from the Student Financial Services Office, Registration and Records, Academic Advising and the Dean’s Office.

5. The student will be provided written notification of the decision of the Satisfactory Academic Progress Committee from the Chairman of the Appeals Committee of Student Financial Services Office, via email and the US Post Office at their permanent address.

Supporting Documentation

1. To support the student’s request for appeal, it may be necessary for the student to provide written documentation from his/her health care provider(s). If so, the documentation should be on health care provider letterhead.

2. Submit all materials as a single packet to the Student Financial Services Office. Any missing information will delay consideration of the student’s request.
Financial Aid Satisfactory Academic Progress (FASAP) Appeal

Submit Completed Appeal Form: Student Financial Services
36 S. Wabash, 12th Floor
Chicago, IL 60603
Office: (312) 629-6600
Fax: (312)629-6601
Email: finaid@saic.edu

Complete this form and attach all additional documentation needed for your appeal. (See Instruction Sheet)

Date:________________________ Program: _____UG _____GR SAIC ID:____________________

Name: ____________________________________________ Email: ____________________

Address: ________________________________________________________________________

City/ State/Zip:________________________ Phone: ______________________

1. Please check the term for which you are submitting a FASAP appeal.
   Fall _____ Winter _____ Spring _____ Summer _____ Year: ________

2. Please indicate:
   a. the reason you failed to make satisfactory academic progress (i.e., death of a relative, injury, illness or other circumstances), and
   b. what has changed that will all you to make satisfactory academic progress by the end of the next payment period.

3. Please attach any documentation that will support your appeal. This can include, but is not limited to a statement from a physician on his/her letterhead explaining the nature and dates of the illness or injury, a photocopy of the death certificate that includes the name of the deceased, any other documentation of extenuating circumstances.
Check any that apply:

_____ Additional page(s) attached

_____ Supporting documentation attached

All the materials for your FASAP Appeal should be submitted to the Student Financial Services Office together as one package.

I certify that all information and documentation I have submitted pertaining to this appeal is true. I understand that the decision of the FASAP Appeals Committee is final.

__________________________________ _____________________
Signature Date

For Office Use Only
Reason for unmet SAP:
Course Completion Rate
Time Frame (150 % rule)
Results of the Appeal

Denied _____

Approved _____ Effective ___________ term Year___________