



# Beaufort County Community College

Office of Financial Aid

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2019-2020

## Satisfactory Academic Progress (SAP) Appeal

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ BCCC Email Address: \_\_\_\_\_

Program of Study: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

The U.S. Department of Education requires each school that participates in Federal Student Financial Assistance programs to establish minimum standards for measuring Satisfactory Academic Progress (SAP). Students who receive federal and state aid such as Federal Pell Grant, Federal Supplemental Educational Opportunity Grant, Federal Work-Study and NC State Grants must adhere to the SAP Policy.

Continued eligibility for financial aid is determined, in part, by maintaining satisfactory academic progress toward the completion of a degree program. Cumulative grade point average and the percentage of credit hours completed define satisfactory academic progress. In addition, students must complete their respective academic program(s) within 150% of the hours required. Students who fail to meet these academic progress standards are ineligible for federal and state assistance.

Federal regulations allow students to appeal financial aid standings under certain conditions with proper documentation. BCCC recognizes that mitigating circumstances may prevent a student from completing a semester successfully.

Students who wish to appeal their unsatisfactory financial aid status due to mitigating circumstances, must complete this form entirely and submit to the financial aid office prior to the beginning of the next term of enrollment. Mitigating circumstances include but are not limited to the following:

- A serious/prolonged illness or accident that contributed to your failure to maintain satisfactory progress.
- The death of an immediate family member. An immediate family member may include a parent, spouse, child or sibling.
- Other circumstances beyond your control.

Extenuating circumstances may be a serious illness or accident that prevented your from attending classes, domestic violence, change in personal circumstances (divorce, homelessness, loss of income, etc.), or other severe personal problems such as a medical or legal issue. It is strongly recommended that you attach supporting documentation.

Examples of non-appealable reasons are immaturity of the student in past years, being a single parent, transportation issues, lack of childcare, pregnancy, registering for more class than you are capable of completing or changing program of study multiple times.

Ensure the SAP appeal address each term for which you had withdrawals, incompletes or failing grades. Documentation should address each term for which you are appealing your academic progress. **Additionally, Section C must be completed by your academic advisor.**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**SECTION A: TO BE COMPLETED BY THE STUDENT**

**Please check the term for which you are appealing to have your financial aid reinstated:**

- Fall 2019
- Spring 2020
- Summer 2020

**Reason for Appeal (Check all that apply):**

- Grade Point Average – Cumulative grade point average (GPA) below requirements
- Completion Rate - Completed less than 67% of attempted hours
- Both Grade Point Average and Completion Rate
- Maximum Timeframe- Working on Second Program of Study

**Discuss the circumstances that prevented you from meeting the Satisfactory Academic Progress (SAP) while attending BCCC. Be specific about the events and the affected period(s) of enrollment. (Use separate page if needed)**

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**Discuss what has changed in your situation so you can now succeed at earning your degree, diploma, or certificate at BCCC. Describe the efforts or steps you have made which will now allow you to meet the academic progress requirements in your next term of enrollment. (Use separate page if needed)**

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**SECTION B: STUDENT CERTIFICATION**

I understand that a decision regarding this appeal will be made taking all of the information I have provided into consideration. If my appeal is approved, I will be expected to make SAP during my next term of enrollment which will be a semester under financial aid probation. If I have been enrolled in the most recently concluded semester, I am aware that my appeal will not be reviewed until my semester grades have been evaluated. I certify that the information I have provided is true and accurate to the best of my knowledge.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**SECTION C: TO BE COMPLETED WITH FACULTY/ADVISOR**

Student must meet with a counselor or faculty advisor prior to having SAP appeal reviewed to discuss academic plan. Please have a counselor or faculty advisor complete the section below.

List the total hours remaining for the student to graduate and only the classes you recommend for the student to enroll in the next semester.

Program Name: \_\_\_\_\_ Program Number: \_\_\_\_\_

Please list the **TOTAL HOURS REMAINING** to complete current program: \_\_\_\_\_

Course Prefix	Section Number	Course Name	Credit Hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Semester Hours: \_\_\_\_\_

Advisor Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Advisor Name (Print)

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date

**APPEALS must be received fifteen business days prior of the term in which you are appealing; except for summer term three business days. Student will be notified of the appeal decision by email upon the review of the appeal.**

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**FOR FINANCIAL AID OFFICE USE ONLY**

Name of Program: \_\_\_\_\_

Total Hours Attempted: \_\_\_\_\_ Total Hours Completed: \_\_\_\_\_ Pell LEU: \_\_\_\_\_

Completion Rate (Pace): \_\_\_\_\_ GPA: \_\_\_\_\_ 150% Hrs. of Program: \_\_\_\_\_

Previous Appeal:  Yes  No Number of Appeals: \_\_\_\_\_ Dates and Decisions of Appeals: \_\_\_\_\_  
\_\_\_\_\_

Documents Attached:  Yes  No

Academic Transcript

SAPV (Screenshot from Colleague)

Reason for Appeal (Check all that apply):

- Grade Point Average – Cumulative grade point average (GPA) \_\_\_\_\_ of 4.0
- Completion Rate - Completed less than 67% of attempted hours
- Both Grade Point Average/ Completion Rate
- Maximum Timeframe- Working on Second Program of Study

**A decision has been made to  approve  deny the financial aid appeal for the student listed.**

- Appeal approved. Student must receive a cumulative GPA of \_\_\_\_\_ and an overall completion rate of 67% at the end of the probationary semester.
- Appeal approved with recommendations. (see recommendations/comments)
- Appeal denied due to insufficient information.
- Appeal denied due to completion rate.
- Appeal denied due to grade point average.
- Appeal denied due to grade point average and completion rate.
- Appeal denied due to hours needed to graduate, which exceeds the 150% rule.
- Other: \_\_\_\_\_

Recommendations/comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FA Reviewer: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_