



**SATISFACTORY ACADEMIC PROGRESS FINANCIAL AID APPEAL FORM**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Student ID (**NOT Social Security Number**) \_\_\_\_\_ Campus Location \_\_\_\_\_

Email (campus) \_\_\_\_\_ Phone \_\_\_\_\_

This appeal is for (mark one): \_\_\_ Summer 2017 \_\_\_ Fall 2017 \_\_\_ Spring 2018 \_\_\_ Summer 2018

**Deadlines for appeals:** Fall 2017 must be received by August 1<sup>st</sup> 2017  
Spring 2018 must be received by January 2<sup>nd</sup> 2018  
Summer 2018 must be received by May 16<sup>th</sup> 2018

Reason for Appeal (mark one)

- \_\_\_ GPA lower than required
- \_\_\_ Rate of completion lower than required
- \_\_\_ Maximum time without a degree earned

**INSTRUCTIONS**

- Complete ALL sections of the Financial Aid Appeal Form.
- Attach appropriate documentation (3rd party unrelated professional source) for extraordinary circumstance as defined in the federal SAP policy (see website). Examples would include letter confirming medical treatment/illness, severe accident confirmation of death in immediate family and how that family member's death affected your academic progress and official death certificate. **Work is not considered an extraordinary circumstance.** All documentation must be both date and time specific.
- Attach a current college academic transcript. Grades for the **most recent term** of enrollment (including current term if you are enrolled) must be included on the transcript.
- If appealing maximum credits, you **MUST** furnish a graduation plan signed by you and your academic advisor. This plan must be course, credit and term specific.
- Return the Financial Aid Appeal Form and all required forms to Coastal Alabama Community College, ATTN: Financial Aid office:

**Coastal Alabama Community College  
Financial Aid  
Central Processing Office  
1900 Highway 31 S  
Bay Minette, AL 36507  
Phone: 251-580-2151  
Fax: 251-580-2182**

Email: [financial\\_aid@coastalalabama.edu](mailto:financial_aid@coastalalabama.edu)

**This appeal will not be considered if you fail to follow the instructions listed above or if you do not have a 2017 2018 Student Aid Report (FAFSA) on file.**

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**For Office Use Only:**

Date Received: \_\_\_\_\_ FAA Initials: \_\_\_\_\_

Decision: Approved \_\_\_\_\_

Academic Plan \_\_\_\_\_

Denied \_\_\_\_\_

Deferred \_\_\_\_\_



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**Part One**

**PLEASE WRITE NEATLY** (If additional space is needed, please attach a separate sheet of paper)

What extraordinary circumstances beyond your control prohibited you from meeting Financial Aid Satisfactory Academic Progress requirements? Failure to address extenuating circumstance(s) may result in denial of all future aid. BE SURE TO ATTACH 3RD PARTY NON-RELATED PROFESSIONAL DOCUMENTATION TO SUPPORT YOUR CIRCUMSTANCES.

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**Part Two**

Please explain what changes have occurred that will enable you to meet Financial Aid Satisfactory Academic Progress requirements? What is your academic success plan to do better (academic tutoring, counseling, etc.)? **Your academic success plan must state what you are going to do differently academically to ensure academic success. This must be what you plan to do with your academics not with your personal circumstance.**

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Note: For other information on The Federal Policy for Satisfactory Academic Progress, it can be located at [http://www.coastalalabama.edu/financial\\_aid/financial\\_aid\\_policies/](http://www.coastalalabama.edu/financial_aid/financial_aid_policies/).

Students Signature \_\_\_\_\_ Date: \_\_\_\_\_