FINANCIAL AID
SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL
AND
PLAN OF RESOLUTION (POR) FORM

The Student Finance Appeals Team (SFAT) is scheduled to meet the last Tuesday in each month. Your completed Financial Aid Satisfactory Academic Progress (SAP) Appeal and Plan of Resolution (POR) Form will be evaluated for consideration in the month received provided the complete application is received at least one day prior to the meeting date; otherwise, it will be reviewed the following month. The student will be notified of the results of the SFAT meeting via the email address provided on this application; NO INFORMATION will be provided by phone.

To guarantee consideration of your request, you must:
- Complete Financial Aid SAP Appeal (1st page)
- Meet with Financial Aid Advisor to complete the Plan of Resolution
- Submit Financial Aid SAP Appeal with supporting documentation
- Complete FAFSA (completed online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov)), if selected for verification by the Department of Education, you must provide all required documents for your appeal to be considered.

All documents must be received before the deadline. If documentation is not attached, your application will be marked incomplete and will not be reviewed. You must document your special or mitigating circumstance. The circumstance will be considered ONLY once. (Example: Medical circumstance must be submitted with documentation from your medical provider).

Student Name ____________________________
Student ID/SSN __________________________
Street Address ____________________________
City __________________ State __________ Zip ___________
Email ____________________________
Telephone number __________________________

Please answer all questions: (Completed by student)

1) Have you been placed on Academic Suspension at Shelton State previously? _____Yes  _____No

2) Indicate the term/year that you are requesting your Pell Grant be reinstated.
   Fall ________ Spring __________ Summer _________

3) Please attach an essay (typed) describing the circumstance causing you to fall below the minimum standards of academic progress and indicate the semester(s) that you completely withdrew or failed. For harassment or physical abuse, a police report and/or documentation is required from your medical provider. All information will be kept confidential. the circumstances causing you to fall below Shelton State’s minimum academic standards of progress (SAP) for receiving Pell Grant, and the measures you have taken to become a successful student in the future. Be specific, indicate the semester(s) you are appealing, and provide documentation. Attach the essay to this packet.

4) Make an appointment with a Financial Aid Staff Member to complete the POR. The POR section must be completed with a financial aid staff member regarding your enrollment plans for future semesters while attending under an approved plan.

5) What is your anticipated date of graduation? ____________________________

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Revised 09/19/13
You must MAKE AN APPOINTMENT to complete this section with a financial aid staff member; email ssccfinancialaid@sheltonstate.edu to make an appointment.

Students placed on Financial Aid Suspension may seek Pell Grant eligibility by completing the Financial Aid Satisfactory Academic Progress (SAP) Appeal and Plan of Resolution Form. The Financial Aid Office will use this form as a guide for the student’s continued eligibility for Pell Grant during the subsequent semesters.

**Student’s current Financial Aid Progress**

<table>
<thead>
<tr>
<th>Attempted</th>
<th>Passed</th>
<th>%</th>
<th>GPA</th>
<th>Quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours:</td>
<td>Hours:</td>
<td>Completed:</td>
<td>Hours:</td>
<td>Points:</td>
</tr>
</tbody>
</table>

Hours needed to Achieve FA Compliance: Completion rate: GPA:

**Student’s current Program of Study (POS):**

<table>
<thead>
<tr>
<th>Hours in POS:</th>
<th>Hours Allowed:</th>
<th>Hours Attempted:</th>
<th>Hours Att. Not Required:</th>
</tr>
</thead>
</table>

Hours Remaining in Student’s POS: Student is within the required time frame limit: Yes No

Student is within the 12 Full-time Semesters of Lifetime Eligibility limit: Yes No % Remaining:

<table>
<thead>
<tr>
<th>Hours completed towards degree plan</th>
<th>Hours needed to graduate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course Schedule Term/Year:_________</td>
<td>Credit Hours</td>
</tr>
<tr>
<td></td>
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<td>Course Schedule Term/Year:_________</td>
<td>Credit Hours</td>
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<tr>
<td>Required Developmental Courses</td>
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</tbody>
</table>

Recommendations such as a program of study change, reduced course load, course forgiveness, academic bankruptcy/amnesty, application for graduation evaluation, reduced work hours, and/or a break from school.
The following are requirements of the approved appeal process and plan of resolution. Each of these is a condition for continued approval for eligibility for Federal Aid.

- I will meet with the Financial Aid Staff Member at midterm on ________________________________. I understand that this meeting is a requirement of my continued eligibility for Federal Aid. During this meeting there will be a subsequent meeting scheduled at midterm of the next semester.
- I understand that I must receive a passing grade in all courses to continue receive financial aid on this plan.
- I understand that I cannot withdraw from any classes while on an approved appeal.
- I understand that it is my responsibility to meet with a financial aid staff member at mid-term of each semester to review my progress/status for the next semester.
- I understand that failure to abide by the guidelines in this appeal will result in Financial Aid Suspension.
- I understand that I cannot apply for another appeal if I fail to meet the requirements for in this appeal.

_________________________________________  ____________________________
Student’s Signature  Date

_________________________________________  ____________________________
Financial Aid Staff Signature*  Date

*If Financial Aid SAP Appeal and POR is not signed by Financial Aid Staff member, your appeal will not be considered.

For consideration, this appeal form must be completely filled out, signed, and submitted with documentation to substantiate your special or mitigating circumstance(s).

**Important Information:**

1. Each student receiving Title IV aid is expected to complete their designated course of study within a period not to exceed 1.5 times the length of his or her program of study; e.g., a two-year program of study (six semesters) must be completed within three years (nine semesters) of attendance. The formula used to determine the time frame allowed by the program of study is: Total hours required for program completion multiply by 1.5 = Time frame limit.

2. As of Fall 2012, developmental courses can improve your GPA and/or completion rate.

**Note:** It is the student’s responsibility to communicate with the advisor concerning their financial aid status. You cannot change your program of study without declaring the change with the Admission’s Office. You must follow the program of study as listed in the catalog or with the STARS Guide. It is the sole responsibility of the student to be sure that ALL documentation and required documents are attached to this Financial Aid SAP Appeal form.
FINANCIAL AID SAP APPEAL AND POR REQUIREMENTS

I. A student may appeal financial aid suspension if he or she meets one of the following conditions:
   A. Mitigating circumstances such as illness, hospitalization, death in family, or accident limited your ability to be successful at Shelton.
   B. Successful completion of all courses during your warning semester.

II. Typed Essay
   A. Include your full name and student number.
   B. Your essay must address the following questions:
      1. Why did you perform below Satisfactory Academic Progress (SAP) requirements in previous semesters here at Shelton State?
      2. What measures have you taken since that time to become a successful student?
      3. If you were to be given a second opportunity to receive financial aid, what measures would you take to ensure meeting the Satisfactory Academic Progress requirements?

III. Documentation
   A. Documentation must be provided to support and verify any mitigating circumstances (medical conditions, accidents, deaths, transportation issues) causing you to fall below SAP requirements.
   B. Examples of acceptable documentation include: birth certificates, death certificates, obituaries, letters from medical providers, court documentation. If you have questions regarding the documentation you wish to provide, please contact the Financial Aid Office.

IV. Completed Appeal and Plan of Resolution (POR) Agreement:
   The POR portion must be completed under the guidance of a Financial Aid Advisor. Please contact the Financial Aid office to set up an appointment with an Advisor.

V. Other Important Facts: In general,
   A. Students granted an appeal cannot attend fulltime.
   B. Students granted an appeal cannot withdraw or fail a class while under their Plan of Resolution (POR) agreement.
   C. If a student withdraws or fails a class before coming into compliance with the SAP requirements, they will lose their financial aid and will not have another opportunity to complete an appeal.
   D. Each student receiving Title IV aid is expected to complete their designated course of study within a period not to exceed 1.5 times the length of his or her program of study; e.g., a two-year program of study (six semesters) must be completed within three years (nine semesters) of attendance. The formula used to determine the time frame allowed by the program of study is: Total hours required for program completion multiplied by 1.5 = Time frame limit.
   E. ONLY one (1) Appeal after Fall 2010 implementation.