Satisfactory Academic Progress (SAP) Appeal for Undergraduate Students

Deadlines to submit appeal: Fall 2015: Friday, September 11, 2015; Spring 2016: Friday, February 5, 2016

There are no SAP appeals for summer financial aid.

Student Name: ___________________________ Student ID: ___________________________

Email: ___________________________ Phone: ___________________________

Federal regulations require that students meet specific Satisfactory Academic Progress (SAP) requirements to maintain eligibility for financial aid. By completing this form, you are appealing for continued financial aid eligibility for one or more terms in the 2015-16 academic year. For more information about UC Berkeley’s SAP policy, please visit: http://financialaid.berkeley.edu/satisfactory-academic-progress. NOTE: Submitting an appeal does not guarantee approval or reinstatement of your aid eligibility.

INSTRUCTIONS: Complete sections I and II of this form and attach appropriate documentation from either section III OR IV below as required. Incomplete appeals may cause processing delays.

Section I: Select the reason(s) for your appeal. Continue to Section II.

☐ A) My GPA is below the 2.0 minimum required
☐ B) My cumulative unit total is less than SAP minimum required

☐ C) Exceeding Years: My cumulative years of enrollment have exceeded the five-year maximum allowed under the SAP policy.

Note: Cumulative years include time spent at any college or post-secondary institution, including non-AP college transfer units earned in high school, semesters during which you withdrew, and semesters during which you did not receive aid.

Section II: Indicate if you have submitted a SAP Appeal(s) previously.

☐ A) This is my first SAP Appeal.
  ☐ Yes: If you selected only reason C in Section I, skip to Section IV. If you selected reasons(s) A and/or B, complete Section III.
  ☐ B) If this is not your first appeal, did you successfully complete the conditions of your previous appeal and academic plan?
  ☐ Yes: If you had an approved SAP appeal in a prior year and successfully completed the number of units outlined in each term of the previous academic plan with a 2.0 GPA, skip Sections III and IV and submit page one and two of this form. No additional documentation is required.
  ☐ No: If you completed an SAP appeal in a prior year and experienced new circumstances that prevented successful completion of your prior academic plan, complete Section III.

Section III: Complete the steps below if instructed to in Section II.

☐ Write a detailed letter outlining the circumstances that require you to request an exception to the SAP policy. Include specific details, when appropriate, such as dates. Address how circumstances have changed and what actions you have taken or plan to take that will enable you to achieve academic success and degree completion.
☐ Submit relevant documentation that supports your letter of explanation.
☐ Meet with your major advisor (if declared) and then your college advisor (if different from major advisor) to develop a comprehensive plan.
☐ If certified by the Disabled Students Program (DSP), contact your DSP Advisor to review your academic plan.
☐ Ensure your advisors complete page 2 of this form.

Section IV: Complete the steps below if you selected ONLY reason C in Section I above and this is your first SAP Appeal.

☐ Write a detailed letter outlining the circumstances that require you to request an exception to the SAP policy for exceeding years and what actions you have taken or plan to take that will enable you to achieve degree completion successfully. For example, you were admitted to UC Berkeley with a significant number of transfer units but still have remaining University, major and/or college requirements to complete in the current academic year to fulfill graduation requirements.
☐ Submit relevant documentation that supports your letter of explanation.
☐ Meet with your major advisor (if declared) and then your college advisor (if different from major advisor) to develop a comprehensive plan.
☐ If certified by the Disabled Students Program (DSP), contact your DSP Advisor to review your academic plan.
☐ Ensure your advisors complete page 2 of this form.

I understand that I am appealing for continued financial aid eligibility as an exception to the SAP Policy. I agree to re-establish satisfactory academic progress by following my academic plan and successfully completing the units indicated, for every term listed on page two of this form. I also understand that failure to do so will result in my ineligibility for financial aid in future terms. Student

Signature: ___________________________ Date: ___________________________
Satisfactory Academic Progress (SAP) Appeal for Undergraduate Students

Student Name: ___________________________ Student ID: ___________________________

School or College: ___________________________ Major(s)/Minor(s): ___________________________

DSP Certified Students Only: Have you been certified for a reduced course load?  ☒ Yes  ☐ No

Anticipated Completion Date [Term/Year]: ___________________________

TO BE COMPLETED BY YOUR COLLEGE/MAJOR ADVISOR

Dear Advisor: To maintain federal financial aid eligibility, students must be making Satisfactory Academic Progress (SAP) toward degree completion as stated in our policy at http://financialaid.berkeley.edu/satisfactory-academic-progress. The student above is appealing for continued financial aid eligibility as an exception to this policy.

Proposed Program Completion to be completed by academic advisor(s)

Beginning with the current term, indicate the number of units the student is required to complete in order to meet his or her Major, College and University graduation requirements. If college and major requirements are the same, complete only total units required column. To assist us with any additional follow up, please initial any notes or comments added.

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<tr>
<th>Academic Term</th>
<th>Major units required</th>
<th>College units required (other than major units)</th>
<th>Total units required</th>
<th>Advisor Notes and Comments</th>
<th>Advisor Initials</th>
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Required Signature(s): By signing below, I certify that I met with the student and we developed an academic plan that will ensure both academic success and completion of graduation requirements within the semesters indicated above. I further certify that the student, to the best of my knowledge, has the capacity and ability to successfully meet these academic requirements each term.

Major Advisor(s) (required for declared L&S and CNR students)

Signature: ___________________________ Date: ___________________________ 
Print Name: ___________________________ Phone: ___________________________

College Advisor(s) (required for all students)

Signature: ___________________________ Date: ___________________________ 
Print Name: ___________________________ Phone: ___________________________

DSP Advisor (required if DSP certified): I certify that I have reviewed this academic plan and I am in agreement with this plan.

Signature: ___________________________ Date: ___________________________ 
Print Name: ___________________________ Phone: ___________________________

*The ASUC Student Advocate’s Office is a student-run office that provides free, confidential advice and representation for students who experience conflicts with the University. If you would like additional support, please contact them: help@berkeleysao.org.