Fall 2022 Satisfactory Academic Progress Appeal Form

***Please read all of the instructions and what is needed to have your appeal reviewed. It cannot be reviewed by the committee until all the necessary paperwork is received.***

A student may appeal the suspension of their financial aid eligibility resulting from failure to meet the Satisfactory Academic Progress criteria by submitting the following to the Financial Aid Office:

1. This form filled out completely with a handwritten signature.
2. A typed explanation of the circumstance that caused your lack of academic progress. If you are in a Pre-Program, please include when you plan to apply for the Professional portion of your program in your statement. Please outline the changes you have made to prevent this situation from recurring. Be specific in your explanation. Be sure to have your CWID on your statement.
3. Provide any supporting documentation that supports your reason for not meeting Satisfactory Academic Progress. Failure to submit adequate documentation upon initial submission could result in an automatic denial.
4. Your degree plan from your Academic Advisor with classes completed and classes still needed.

ALL APPEAL DECISIONS ARE FINAL. Please allow 10-15 business days for the appeal decision after all required information has been submitted to the Financial Aid Office. A copy of the Satisfactory Academic Progress Policy can be found on the ULM Office of Financial Aid web site. An appeal decision may impose limitations upon aid eligibility and/or future minimum academic standards. You will be notified of the appeal decision via ULM Warhawk email and/or Banner under your Financial Aid Eligibility tab. It is the student’s responsibility to make other arrangements to pay any tuition and fees while appeal is being reviewed.

If your appeal is approved, you are expected to complete 100% of the classes you attempt while on appeal approval. (no F, W, or I grades while in probationary status). You also have to make a semester GPA of 2.0 for UG and 3.0 for GR while on an appeal approval.

Name: ____________________________  CWID: ____________________________  DOB: ________________
Address: ____________________________  Phone #: ____________________________

City ____________________________  State ____________________________  Zip ________________  Email: ____________________________

Academic Level (circle one) 
- Undergraduate 
- Graduate 
- Professional 
- Doctorate

Major: ____________________________  Expected Graduation Date: ________________  Hours Remaining: ________________
Potential Reasons to Appeal your Financial Aid:

1. Personal injury or illness of self

2. Illness, Injury or death of an immediate family member.

3. Other extenuating circumstance (Work does not qualify as an extenuating circumstance)

4. Any student pursuing a 2nd degree or beyond: Please be sure you are fully admitted into new program you are pursuing.

Please Initial by each statement below if you understand the terms of an appeal if approved.

Do you understand you must pass 100% of the classes you attempt while on appeal? You cannot drop, fail, withdraw or have any incompletes during this time. That voids your appeal agreement. _____ Yes _____ No

Do you understand that you may have to complete an Academic Plan each semester while you are on appeal, and that it is your responsibility to obtain the required form needed from the Financial Aid Office each term? _____ Yes _____ No

______________________________  ________________________
Student Signature            Date
(No e-signature)