



**Office of Financial Aid & Scholarships**  
**Satisfactory Academic Progress (SAP) Appeal**  
Requesting Financial Aid Reinstatement due to **GPA and/or PACE**.

Submission of this form does not guarantee reinstatement of financial aid eligibility.

<b>Student Name:</b> _____ <b>Student SID#:</b> _____
This appeal is for _____ quarter.

**Information:**

- Incomplete forms and forms submitted with no supporting documentation will be **denied**.
- If your appeal is approved, you will be awarded financial aid based on funds available at the time of your approval. **Financial aid cannot be reinstated retroactively for completed quarters.**
- Maximum time frame (MTF) appeals require a different application. Only Federal aid can be appealed. **See the MTF Application.**

**Directions:**

- Complete the form and indicate your reason for appeal. Complete Page 3 with an academic advisor.
- Provide relevant documentation.
- Submit the completed, signed form to the Office of Financial Aid & Scholarships by the posted deadline.
- Graduate students only: For GPA suspensions, you must submit a letter signed by the Dean of Graduate Studies confirming your ability to continue your program. Appeal will be granted for **one quarter**.
- **Forms uploaded to your MyCWU To-Do list do not need to be signed.**

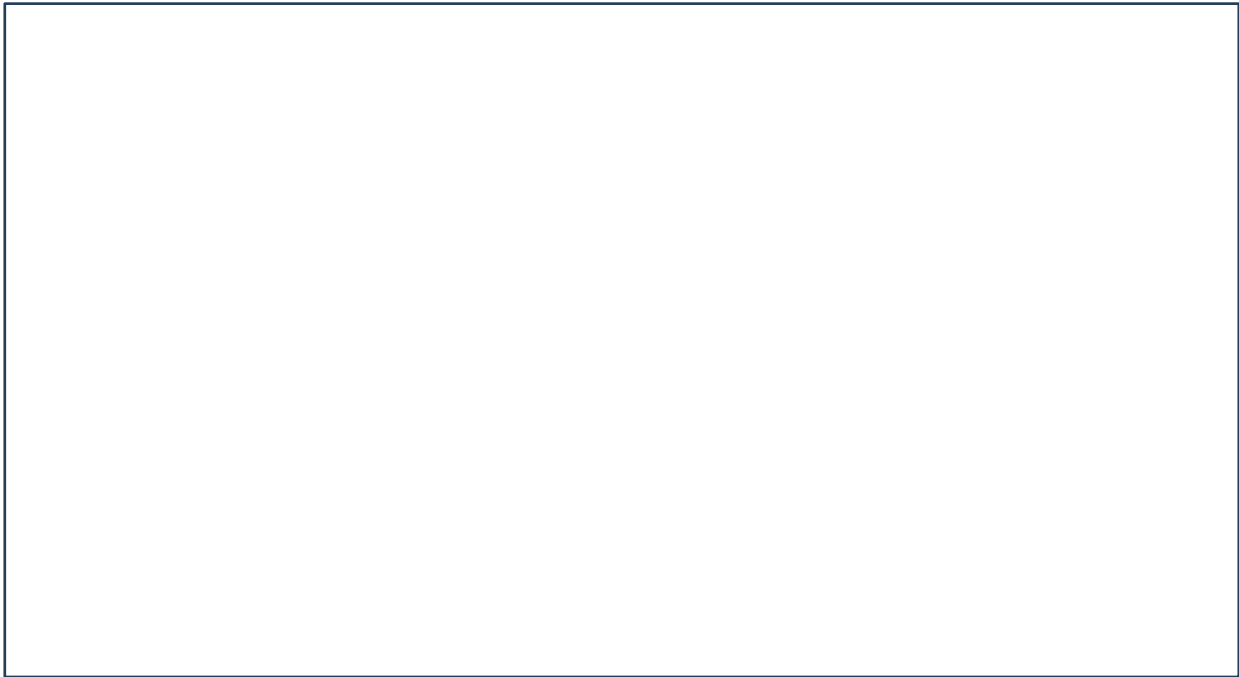
Circumstances for an appeal - Reasons for appeal may include, but are not limited to:

- Injury, illness, or incapacity
- Family emergency
- Regained eligibility
  - You attended at least one quarter without aid and now meet minimum GPA and/or Pace requirements for financial aid. Skip the question boxes, sign, and date.

Documentation: Examples may include:

- Medical documentation (with dates)
- Police report (with dates)
- Obituary
- Reduced work hours
- Reduced credits
- Housing/Living contracts/lease.
- Demonstrated academic progress

**What circumstances caused you to fall below academic progress requirements?**



**What changes have been made to support your success going forward?**



## Academic Plan

An academic advisor must approve this plan. It will be submitted with your SAP appeal. The plan must show how many quarters it will take to meet SAP Eligibility requirements. For more information, review the CWU SAP Policy. **Submission of this form does not guarantee approval.**

**Student Information:**

<b>Total Attempted Credits:</b> _____	<b>Rate of Completion:</b> _____
<b>Total Earned Credits:</b> _____	<b>Cumulative GPA</b> _____

**Plan for future quarters:**

Quarter	# Credits (Total)	Projected Quarterly GPA	# of credits being repeated	Previous grade of repeated course
<i>Ex: Winter 2027</i>	<i>15</i>	<i>3.0</i>	<i>5</i>	<i>F</i>

**Academic Advisor Comments (Encouraged):**

**Academic Advisor Name:** \_\_\_\_\_

**Academic Advisor Signature:** \_\_\_\_\_

**Student Statement:** I worked with my academic advisor to create this academic plan. I agree this plan is attainable for me, and I will adhere to the terms of this plan. I understand I must satisfy the academic plan requirements to receive financial aid. I understand my financial aid will be revoked or denied if I do not meet the requirements of this plan.

If at any time I am not able to meet the requirements, I agree to contact the Office of Financial Aid to discuss my options.

**If uploaded in MyCWU, the student doesn't need to physically sign this form.**

<b>Student Signature:</b> _____	<b>Date:</b> _____
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