

SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FOR EXTENSION OF FINANCIAL AID

If you wish to appeal the loss of your financial aid eligibility, please complete this form, and include all required documents. NOTE: This is a fillable form. Please complete the form electronically to ensure more efficient processing. PLEASE READ EACH SECTION AND FOLLOW THE INSTRUCTIONS TO ENSURE THAT THERE ARE NO PROCESSING DELAYS.

Student Name:	Student ID # (Required):	
enrolled in a combination of sessions (semester, it is the last day to "add" for	o submit an <u>SAP</u> appeal is the last day to "add" a class. If you are <u>16-week, 12Wk, 10Wk, 8W1, 8W2, 5W1, 5W2, 5W3, etc.</u>) within the the longest session that you are enrolled in. Late appeals will be emmunication for appeals will be sent to your Message Center in SIS.	
WITH AN ACADEMIC ADVISOR TO REVIEW	COMPLETE THE <u>COURSE COMPLETION PLAN</u> ON THE LAST PAGE <u>AND</u> MEET V AND SIGN OFF ON THE PLAN. YOU MUST FOLLOW THE ACADEMIC AN APPOINTMENT VIA NAVIGATE IN <u>MyVPCC</u> .	
standard for the current year, you will	factory Academic Progress standards for 67% completion and/or GPA be required to submit the Satisfactory Academic Progress (SAP) Appeal peal. (This will be listed in your To Do List on the Student Center in SIS.) polies to you:	
\square I was also notified that I am not med	eting the SAP standards for 67% completion or the GPA standard.	
I would like my financial aid eligibilit	ty re-evaluated for the semester I am returning below:	
Award Year:	Select One Semester: ☐ Fall ☐ Spring ☐ Summer	
Select the reason(s) for your appeal below	v and provide the additional requested information.	
☐ I previously completed a program at Vir Virginia Peninsula Community College.	rginia Peninsula Community College and am pursuing another program at	
Name of completed program		
Graduation date of completed progr	ram	
Name of new program		
Expected graduation date for new p	rogram	
☐ I previously completed a program at an Peninsula Community College. Enter the na	other college/university and am now pursuing a program at Virginia ame of other college here:	
Name of completed program		
Graduation date of completed progr	ram	
Name of new program at VPCC		
Expected graduation date for new p	rogram	
☐ I have not completed a program at any	college/university.	

Explanation: Explain below why you have not completed your current program of study at Virginia Peninsula Community College and what your plan is to complete the program in a timely manner.
Type your explanation here:

Student ID:

Certification Statement: Read and initial each statement below before signing and certifying. Failure to initial each statement will result in a denial.

- I understand that my appeal will be denied if all parts are not completed AND supporting documentation is not submitted.
- I understand that I, the student, must complete the 'Completion Plan' and meet with an Academic Advisor.
- I understand that submission of this appeal does not guarantee that my financial aid will be reinstated.
- I understand that this appeal may take 15 business days or longer to review.
- I understand that if my appeal is approved, I will have stipulations outlined in an Academic Plan that must be followed for me to remain eligible for federal student aid.
- I understand if my appeal is approved, I must read, sign, and submit the Academic Plan Agreement to regain my financial aid eligibility.
- > I understand that any follow up requests or decisions will be sent via the Message Center in SIS.

CERTIFICATION: "I certify that the information on this Satisfactory Academic Progress Appeal and any supporting documentation are accurate, true, and complete to the best of my knowledge. I will provide other information as requested by the financial aid office. I understand that a final decision may not be made on my Satisfactory Academic Progress Appeal until all steps above are complete and until I submit any additional documents if requested by Virginia Peninsula Financial Aid. I understand any false information may be cause for the denial, reduction, and/or repayment of student financial assistance and may subject me to a fine, imprisonment, or both under provisions of the U.S. Criminal Code."

Student Signature — Signature must be hand-signed or an electronic signature as a digital stamp or by using a stylus, finger, or touchpad.

Student Name:

Upload this form by logging into the http://mysupport.vpcc.edu/ using your MyVPCC login information, fax to (757)825-3537, or bring in person (Hampton Campus, Kecoughtan Hall, room 209 / Historic Triangle campus, room 117).

Student Name: Student ID:

COURSE COMPLETION PLAN FOR CURRENT PROGRAM

List the courses you need to complete within the appropriate space below. This page may be handwritten. If completing by hand you must write the year next to the semester.

Fall Select Year	Spring Select Year	Summer Select Year	
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Fall Select Year	Spring Select Year	Summer Select Year	
Fall Select Year	Spring Select Year	Summer Select Year	
Advisor's Name:			
Advisor's Comments (optional):			
The root of comments (opened as).			
Advisor's Signature:			