

Satisfactory Academic Progress (SAP) Appeal

The University requires students to be meeting the standards for Satisfactory Academic Progress (SAP). Students who do not meet Satisfactory Academic Progress (SAP) standards are not eligible to receive financial aid. Students with extenuating circumstances that have led to their inability to meet SAP standards, may submit a SAP appeal for consideration.

INSTRUCTIONS:

- 1. Schedule an appointment with an advisor in the Retention and Student Services Office by calling 401-254-3582 or emailing ucstudentsupport@rwu.edu.
- 2. Students should prepare for the meeting by completing a SAP Appeal Form and gathering supporting documentation to submit at the meeting.

Fall Semester = July 31th Spring Semester = January 31st

*Incomplete or late SAP Appeal Forms will not be accepted.

- 3. Students should bring their completed appeal form (excluding Section D) along with a typed, signed statement and supporting documentation to explain the extenuating circumstances that contributed to not meeting SAP standards. The personal statement should:
 - Explain why you were not able to meet SAP standards.
 - Describe how circumstances have changed that make you feel you can now meet
 SAP standards and/or what steps you will take to accomplish your educational goals.
 - Include documentation that will support your appeal and provide records of your extenuating circumstances.
- 4. During the appointment, the student and advisor will work together to develop an Academic Plan (Section D) for the appeal.

The completed form and supporting documentation will then be submitted by the advisor to the Financial Aid Office. Students can expect to receive the SAP appeal decision from the Financial Aid Office via their RWU email account/letter within 10 business days from receipt of the appeal.

ADVISING AND PEER MENTORSHIP OFFICE USE ONLY:
Appointment with:
Appointment date:
Date submitted to Financial Aid:



SECTION A: Student information (to be completed by the student) First Name: Last Name: MI:								
Student ID Number: _		RV	VU Email:					
Mailing Address:								
City:	_ State:	Zip Code:	Phone Number	:				
Academic Program:	☐ Und	dergraduate	☐ Graduate					
SECTION B: Term of S	SAP Appeal							
I am submitting the Sa	AP Appeal Form fo	or the following sem	ester. Check only one box					
	☐ Fa	II 2023	☐ Spring 2024					
SECTION C: Student C	Certification							
•	•		the best of my knowledge required documentation.	. I have read the				
I understand to	I understand that submitting this appeal is not a guarantee approval.							
I understand that I am responsible for all my debts incurred at the University regardless of my academic status.								
Student Printed Name	e:							
Student Signature: Date:								
SECTION D: Academic Plan (to be completed by advisor) Major:Minor/ Core concentration:								
Number of credits re	maining to comple	ete degree:	Projected Graduation	Date:				
Recommendations fo	or student to assist	t with future academ	nic success, such as referra	ls, reduced course load:				



List the course(s) you need to take including number of credits. Indicate whether or not each course is required to complete your degree. Specify the term and year in which you will complete them.					
□ Fall □ Spring □ Summer 20 □ Fall □ Spring □ Summer 20					
Subject & course number (ex: Math 1000)	# of credits	Required? (Y/N)	Subject & course number (ex: Math 1000)	# of credits	Required? (Y/N)
Total Credits			Total Credits		
☐ Fall ☐ Spring ☐ Summe	r 20		☐ Fall ☐ Spring ☐ Summe	r 20	
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