Office of Student Financial Aid
Satisfactory Academic Progress Appeal Form
For The 2006-2007 Academic Year

A student may appeal the cancellation of their financial aid eligibility resulting from failure to meet the Satisfactory Academic Progress criteria by submitting this form along with any additional documentation of mitigating circumstances which have affected academic progress. A copy of the Satisfactory Academic Progress Policy can be found on the Florida Atlantic University Office of Student Financial Aid web site: http://www.fau.edu/finaid.

NAME ______________________________________ SSN _______________________
ADDRESS ______________________________________ PHONE _______________________
_______________________________________ EMAIL _______________________
City State ZIP

DESCRIPTION OF POTENTIAL CIRCUMSTANCES AND REQUIRED DOCUMENTATION:

☐ Personal injury, illness, or physical disability

REQUIRED DOCUMENTATION:

- Student statement of circumstances, detailing medical condition that impaired performance and why future academic performance will not be impaired by condition.
- Statement from doctor, Health Services, Counseling Center, or Office for Student’s with Disabilities detailing medical condition that impaired academic performance. Statement should specifically address the following:
  - Student’s limiting medical condition and date span for which condition existed.
  - That condition may have impaired academic performance.
  - That student has rehabilitated to such an extent that limiting medical condition should not significantly impair future academic performance.
- Unofficial copy of academic transcript.

☐ Death/illness of immediate family member (family member must be of nuclear family)

REQUIRED DOCUMENTATION:

- Student statement detailing circumstances impairing performance and why future academic performance will not be impaired by circumstances.
- If illness of immediate family member: Statement from doctor detailing medical condition incurred by family member. Statement should specifically address medical condition and date span for which condition existed.
- If deceased: Death certificate or obituary.
- Unofficial copy of academic transcript.
□  **Lack of progress due to first semester at FAU**

REQUIRED DOCUMENTATION:
- Student statement detailing circumstances impeding performance and why future academic performance will not be impaired by circumstances.
- Copy of academic transcript.

□  **Credits attempted at FAU exceed time frame policy maximum**

REQUIRED DOCUMENTATION:
- A completed Satisfactory Academic Progress Appeal Form for Exceeding Time Frame For The 2006-2007 Academic Year. This form can be obtained from the Office of Student Financial Aid or on the Office of Student Financial Aid website [http://www.fau.edu/finaid](http://www.fau.edu/finaid).

□  **Standards of Academic progress now being met**

REQUIRED DOCUMENTATION:
- Copy of academic transcript documenting student is meeting all standards of Satisfactory Academic Progress criteria. A copy of the Satisfactory Academic Progress Policy can be found on the Florida Atlantic University Office of Student Financial Aid website: [http://www.fau.edu/finaid](http://www.fau.edu/finaid).

If one of the above conditions does not apply to your situation, please explain the mitigating circumstances that you feel affected your academic progress during 2005-2006.

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

________________________________________________________

Student Signature  ___________________________  Date  ___________________________