

2019–2020 SATISFACTORY ACADEMIC PROGRESS APPEAL

Student Name: _____ Roosevelt ID: _____

Street Address: _____ Telephone#: _____

City/State/Zip Code: _____

Email Address: _____

The U.S. Department of Education requires all students awarded federal student aid to meet the requirements of Satisfactory Academic Progress (SAP) as defined by the federal government: (1) complete a minimum of 67% of the courses you attempt and, (2) have a minimum cumulative 2.0 GPA. Course outcomes are reviewed every semester. You may submit this appeal to request consideration of extenuating circumstances that affected your requirement to meet the satisfactory academic progress requirements. Both requirements must be met every enrolled semester. You are responsible for the payment of institutional charges due to Roosevelt University by the published due dates.

My Roosevelt University Academic Advisor is _____**This appeal is for reinstatement of financial aid eligibility for the following term:**

- Fall (Deadline: October 31st) Spring (deadline March 31st) Summer (deadline June 30th)

I understand that:

- There are two components to the Satisfactory Academic Progress Policy:
 1. The qualitative assesses my academic performance in the courses that have been completed. I am required to maintain a **2.0 Roosevelt University GPA** at all times.
 2. The quantitative measure assesses my progress in pursuing my degree; this measures the attempted hours versus the hours completed. All RU students **must complete 67% of their attempted hours**. I's, IP's, W's, and F's do not count as credit.
- It is my responsibility to review the Satisfactory Academic Progress Policy, which is available online at www.roosevelt.edu/FinancialAid/Policies/SAP.
- I must be specific about the reason(s) for my appeal.
- I must submit supporting documentation (e.g. a doctor's statement or letter from employer) and that it is my responsibility to provide ALL necessary documentation to support my appeal.
- The reason for failure to maintain Satisfactory Academic Progress standards must be clearly beyond my control.
- The following conditions warrant consideration:
 1. Major disruption of family life, such as divorce, death or serious illness in the immediate family.
 2. My own serious illness or medical complications.
 3. Other situations clearly beyond my control.
- I will be notified in writing once a final decision is made by the appeals committee.
- I may apply for financial aid in anticipation of the approval of my appeal. **If my appeal is denied, I will be ineligible for financial aid.**
- I understand I am responsible for the payment of institutional charges due to Roosevelt University by the published due dates.
- I understand financial aid cannot be applied or paid to my institutional charges unless this appeal is approved.

Submit this worksheet in person to FAS-1M16/Wabash Building, or by email to fas@roosevelt.edu, or by fax to **(312) 341-3545**

A statement is required to explain the reason you did not meet the Satisfactory Academic Progress requirements. Include in your statement your plan to successfully complete the courses in your next enrolled semester. All documents submitted must have student name and RU ID - **Attached additional pages, if needed** –

By signing this form, I certify the information on this form and any attachments are accurate and complete to the best of my knowledge. If requested, I agree to provide documentation to verify the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid and, I may be reported to the Office of the Inspector General and/or subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

PHYSICAL SIGNATURE – DO NOT TYPE

Student Signature

Date

PHYSICAL SIGNATURE – DO NOT TYPE

Parent Signature (DEPENDENT ONLY)

Date

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