

SATISFACTORY ACADEMIC PROGRESS APPEAL

i. Student information				
Last	First			Middle
Street Address		City		State & Zip
Current Phone Number: Email Address:				
Student ID:	Semester: ☐ FA ☐ S	P 🗖 SU (20)		
Degree Type (check one):	■ Traditional	☐ CAPS	☐ Graduate	
 All appeals should include Clearly explain how Provide relevant day 	e a <i>legible</i> statement that the circumstances prevotes and address semested to meet the SAP Stand	nat includes the followented you from moters in which you deducted in the future.	l owing: eeting SAP Standa	mentation must be provided. ards. r academic performance. Explain

appeal will be based on the information included (and supporting documentation will be denied. I also und semester for which I am appealing will not be applied that I may apply for financial aid in anticipation of the based on my eligibility. I will be notified of the results	te SAP Appeals Committee and that approval or denial of this l/or attached). Appeals that are incomplete, illegible, or lack erstand that any financial aid that is currently posted for the d or disbursed unless this appeal is approved. I further understand approval of my appeal and, if approved, my aid will be awarded of my appeal via institutional email.
Student Signature:	Date:
I. Submission Method—Submit all appeals by mail, fa North Greenville University Financial Aid Office P.O. Box 1892	
II. Submission Method—Submit all appeals by mail, fa North Greenville University Financial Aid Office P.O. Box 1892 Tigerville, SC 29688 Fax: 864.818.4681 Email: finaid@ngu.edu	
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