



SATISFACTORY ACADEMIC PROGRESS APPEAL FORM

Student Name: _____ BCC Student ID#: _____

Telephone: _____ BCC Student E-mail: _____

Please indicate which option applies to your situation. This information can be found by checking Self-Service - FA Checklist and clicking on the link that starts with "Your Most Recent SAP Evaluation." Your Cumulative progress and SAP status will be listed. If you have any questions please contact the Financial Aid Office.

- My cumulative Grade Point Average (GPA) is below 2.0
- My cumulative completion rate is below 67%
- My GPA and Completion rate are below the required levels
- I violated the previous conditions of an approved appeal
- I have exceeded the 150% Maximum Time Frame

My cumulative GPA is _____ My cumulative Completion Rate is _____

Attach the following documents to this Appeal Form. **Submitting an appeal does not guarantee approval.**

1. A Typed statement explaining: **(REQUIRED)**
 - Extenuating circumstances that led to the suspension of your financial aid.
 - What has changed to improve your situation moving forward?
 - If this is for timeframe, give the reasons for changing your program of study (or pursuing additional coursework).
2. Supply any and all documentation that supports your explanation. Including, but not limited to:
 - Proof of extenuating circumstances outlined in your appeal letter.
 - Proof of your improved situation moving forward

PLEASE NOTE: Lack of adequate documentation may result in your appeal being denied. If you are submitting your appeal within 7-10 days of a balance due date, you must make arrangements to pay your balance until your appeal is considered.

Max Time Frame Appeals Only:

3. How many semesters do you need to graduate? _____
 - Provide a statement from your academic advisor written on school letterhead or email listing the remaining number of credits needed for graduation and include the month and year of expected graduation.

Student Signature: _____ Date: _____
Written or Digital Only (No typed signature will be accepted)

----- **FOR OFFICE USE ONLY** -----

Completion Rate: _____ % GPA: _____ Max Time Frame: _____

Approved Denied (Circle one) Reviewer's Signature: _____

Comment: _____

