



## Graduate Satisfactory Academic Progress (SAP) Appeal AY 2021-2022

**Directions:** In order to appeal a financial aid suspension, you must complete this form and attach any supporting documentation. At a minimum, a statement must be attached to all appeal forms explaining why your academic performance did not meet the policy outlined on our website, and what will be done differently to achieve academic progress with your program. Please type directly on this fillable Appeal form. Documentation consists of letters, photocopies of bills or official reports, or other information from third-party sources which support your appeal. In order to process your appeal, all supporting documentation **MUST** be attached.

**Please return this form to your Academic Advisor, or Graduate Program Director via email or fax by the deadline stated in your SAP communication.**

Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Degree Objective: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_ Hours needed to complete degree: \_\_\_\_\_

Have you submitted a previous appeal? If yes, what year? \_\_\_\_\_

- 1) Check the semester you are requesting reinstatement of your financial aid eligibility
- |           |             |             |
|-----------|-------------|-------------|
| Fall 2021 | Spring 2022 | Summer 2022 |
|-----------|-------------|-------------|
- 
- 2) Intended semester of graduation:
- |           |             |             |             |
|-----------|-------------|-------------|-------------|
| Fall 2021 | Spring 2022 | Summer 2022 | Other/Later |
|-----------|-------------|-------------|-------------|
- 
- 3) Reason applying for appeal:
- A: I have failed to maintain a cumulative GPA of 3.0 for graduate students (GPA requirement)
  - B: I have failed to complete 5 credit hours/ semester (Semester Hour Completion Rate requirement)
  - C: I have exceeded 150% semester hours for the degree (Maximum Timeframe requirement)
  - D: Other (explain below or in supplemental documents)

In the space below, explain why you failed to meet the requirements of the University of Missouri in St. Louis (UMSL)'s SAP Policy, according to one or more of the stated reasons, OR attach a separate, typed, supporting document or letter of recommendation.

Initial the following statements to acknowledge your understanding of the requirements of submitting this SAP Appeal form:

..... I have read and understand UMSL's Satisfactory Academic Progress (SAP) policy at <https://www.umsl.edu/services/finaid/finaidbasics/sap.html>

..... I understand that the SAP Appeal process is for students impacted by exceptional or extenuating circumstances (circumstances beyond the student's control).

..... I understand that the official supporting documentation is required for all academic SAP Appeals as proof of the circumstances stated above. (Not required for appeal reason C above)

..... I understand that the following additional documentation is required in support of my appeal (as applicable):



- Graduate Satisfactory Academic Progress (SAP) Appeal form (this form), completed in full and signed by my advisor and myself.
- A Degree Program Advising Plan form signed by my Graduate Advisor or Graduate Program Director.
- A Probation Plan signed by my Academic Advisor or Graduate Program Director.

..... I understand that I must be fully admitted to a degree program and that I am only permitted to register for courses that are required by my current degree program, and that I must comply with the Degree Program Advising Plan created by my Academic Advisor.

..... I understand that, if my appeal is approved, I will be placed on "Probation" and must successfully complete all coursework and achieve a minimum Cumulative GPA of 3.0 to avoid suspension of my financial aid. While on probation, I am required to coordinate with my Advisor to ensure a Degree Plan is entered into Starfish listing my courses needed for me to complete the program.

I certify that all information provided is true and accurate to the best of my knowledge. I understand that submitting this appeal is not a guarantee that my aid eligibility will be reinstated, and that I am still responsible for all accrued debts not covered by financial aid, including any late fees that may have been incurred during the review process.

Student Name [typed] .....Date: ...../...../.....

**FOR ADVISOR USE ONLY:**

- **Cumulative GPA (minimum satisfactory GPA is 3.0 for graduate students)**  
Student's current cumulative GPA: .....  
Number of semesters the student must be on an academic plan in order to raise cumulative GPA to minimum standard: .....
- **Completion ratio (minimum satisfactory completion rate is 5 credit hours/semester):**  
Cumulative credits earned (CE): ..... Cumulative credits attempted (CA): ..... Cumulative Completion Ratio:.....  
= CE/CA
- **150% Rule**  
Number of credits required for current degree program: .....Number of credits attempted: .....  
Number of credits student has left to complete program:.....  
*NOTE: Students in violation of the 150% rule may only receive funding for one program at a time.*

I, ....., have reviewed this student's appeal for reinstatement of financial aid eligibility and have identified coursework applicable to their current degree program and collaboratively created a Probation plan. Additionally, I have encouraged the student to utilize available UMSL resources, and to make informed decisions which best serve the student's educational, personal and career development needs.  
Additional comment:  
.....  
.....  
.....

Advisor Signature:  
.....Phone:.....Date:...../...../.....

Dr. Teresa Thiel, Dean of UMSL Graduate School:  
.....Date:...../...../.....