



**Marshall University School of Pharmacy
2014-15 Satisfactory Academic Progress (SAP)
Appeal for Financial Aid Reinstatement**

SAP5FA
SAP5SP
SAP5SU

Instructions:

The Financial Aid SAP Appeal process is a separate and distinct process that pertains specifically to financial aid eligibility.

This form may only be accepted if it is typed and is signed by you and your academic advisor. Also, you must attach any necessary documentation. You are required to review and discuss your prepared SAP Appeal for Financial Aid Reinstatement with your academic advisor, and it is your responsibility once it is signed to submit it to the Office of Student Financial Assistance by the required deadline for the semester or term you are appealing.

You may only submit one appeal per semester or term by the published SAP Appeal deadlines.

Semester/Term	SAP Appeal Deadline Dates
Fall Semester	One week prior to the first day of classes (for 2014-15, August 18, 2014)
Spring Semester	One week prior to the first day of classes (for 2014-15, January 5, 2015)
Summer Terms	End of Award Year (for 2014-1, June 30, 2015)

The SAP Appeals Committee typically renders a decision within two weeks upon receipt of the appeal; however, if the appeal is submitted before your recently taken course grades are reflected on your Marshall University academic transcript, the decision of the committee may take longer.

If your appeal is approved, your reinstatement of financial aid for one semester or term may have conditional requirements. In addition, if your appeal is approved, you will be required to meet requirements of an Academic Plan, which, if followed, will allow you to continue to receive financial aid if all other conditions are met. In this instance, you will be assigned a status called "Financial Aid Probation."

Marshall University School of Pharmacy
2014-15 Satisfactory Academic Progress (SAP)
Appeal for Financial Aid Reinstatement

SAP5FA
SAP5SP
SAP5SU

COMPLETION OF THIS FORM MUST BE TYPED

Name: _____ Email: _____

MUID: 901- _____ Phone Number: _____

Enrollment period for which you are appealing: (check only one)

_____ Fall 2014

_____ Spring 2015

_____ Summer 2015

Step 1:

Provide a detailed explanation (e.g., illness, death in the family, involuntary military leave, or other extenuating circumstances) for your reason for failing the SAP standards. Please be specific in explaining the reason for withdrawing, not completing, or failing to earn a satisfactory grade for all your courses. Also, when applicable, submit documentation verifying your explanation for failure.

For Office Use

Major: _____

Degree: _____

Completed Hours/Attempted Hours: ____/____

Completion Ratio: _____

MU GPA/ Overall GPA: ____/____

Decision: _____

ROASTAT CODE: _____

Signature: _____

Date: _____

Step 2:

Provide an explanation of what has changed (and provide documentation if appropriate) that will now allow you to comply with SAP standards. Provide a statement of your academic objectives for success and your plan of corrective action. **You must attach a copy of your signed Plan of Study indicating which courses you have left to complete your academic program. You must also provide your Academic Improvement Plan if provided one from the Marshall University School of Pharmacy Academic Standing Committee.**

Step 3:

You are required to meet with your academic advisor to discuss this appeal and your academic plan for improvement. **You must obtain your advisor's signature on this form.** Your advisor's signature does not imply endorsement of your appeal; it only represents that you have met with your academic advisor for purposes of proper academic advising and assistance with developing a realistic plan for academic success.

Advisor's (or designee's) Name	Advisor's (designee's) Signature	Date
--------------------------------	----------------------------------	------

Step 4:

Sign and submit the completed appeal form to the Office of Student Financial Assistance, 1 John Marshall Drive, Old Main 116, Huntington, WV 25755 or fax to 304.696.3242.

Student's Name	Student's Signature	Date
----------------	---------------------	------