

**FINANCIAL AID
SATISFACTORY ACADEMIC PROGRESS
(SAP) APPEAL FORM**

Your Financial Aid has been terminated. Please review our Satisfactory Academic Progress Policy, which can be found on our website or at the financial aid office. Students may appeal their financial aid termination status when unusual circumstances beyond their control contributed to their failure to achieve satisfactory academic progress.

SECTION A: STUDENT & TERMINATION INFORMATION (Please Print)	
Name:	*Student ID Number IS REQUIRED BELOW*
Phone Number:	Student ID Number:
Quarter & year that <u>resulted in termination of Financial Aid</u> – Quarter:	Year:
I am requesting reinstatement for: (Check One)	
<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: 20_____	

Please read and follow all instructions carefully.

Incomplete appeals will be denied due to insufficient evidence.

APPEAL PROCEDURE

- Complete by using the back of this form, or a separate sheet of paper. Write a detailed letter explaining the circumstances beyond your control that contributed to your unsatisfactory progress, and the steps you will take to prevent a reoccurrence. Your letter should address each of the following issues:
 - What happened? Be specific. Give as much detail as needed to clearly explain your situation.
 - If it was a specific event or condition, what were the dates of the occurrence?
 - Identify actions you have taken to ensure academic success in the future. (e.g., adjusting credits to a more appropriate load, taking a quarter off to heal, or to improve situation, etc.)
 - Provide any relevant supporting documentation. This may include such things as a note from a doctor, medical records, court documents, obituaries, etc.
- If you have an advocate, professional counselor or physician who can confirm your condition or situation, please have them send the letter directly to the Financial Aid Office. In the letter they should also address the likelihood of reoccurrence.
- Sign below and submit with your letter and documentation to: Wenatchee Valley College Financial Aid Office, 1300 Fifth Street, Wenatchee WA 98801 or FAX: 509-682-6811.
- Responses to your appeal will be emailed to your WVC student email.

I understand that a digital/electronically typed signature has the same legal effect, and can be enforced in the same way, as a handwritten signature.

Student Signature: _____ **Date:** _____

SECTION BELOW FOR OFFICE USE ONLY

_____ **Approved/Reinstated** _____ **Denied** _____ **Not Needed**

Financial Aid Staff Notes:

