

2025-2026
Satisfactory Academic Progress
(SAP) Appeal

Student Information

Student's Last Name	Student's First Name	Student's M.I.	Student's SWOCC Student ID#
Student's Street Address (Apt. No.)			Student's SWOCC Email Address
City	State	Zip Code	Student's Telephone Number

It has been determined that you are not making satisfactory academic progress toward graduation. Satisfactory academic progress is defined as grade point average (GPA), course completion rate (pace), and maximum time frame. Students who fail to meet the minimum standards lose their eligibility to receive federal and state aid. Federal regulations also allow the Office of Financial Aid to extend eligibility to students who fail to meet minimum standards if they can document there were extenuating circumstances, meaning circumstances **beyond their control**, which caused them to perform below standards.

Documentation must be submitted with your appeal to support your statement.

Please see a partial list (below) of common scenarios which would **not** be considered an extenuating circumstance for purposes of appealing the suspension of financial aid:

- Typical adjustments to college life such as working while attending school and financial issues related to paying bills and car maintenance, travel to and from campus.
- Appeals based solely on financial and/or emotional needs without sufficient explanation or documentation.
- Work, since financial aid is viewed as a supplement to a student's income, to help reduce the number of hours the average student would have to work in any given week.
- Childcare, since this would have been an issue if you worked before you enrolled in classes.

Students are responsible for paying all educational expenses until it is confirmed that the appeal is approved or the student has regained satisfactory academic progress and meets all other financial aid requirements. You will also be responsible for any bills incurred for courses that do not drop automatically for non-payment if your appeal is denied even if you choose not to attend classes.

Appeals submitted without proper documentation will be DENIED. Incomplete forms will not be reviewed.

Writing The Appeal

Submit your appeal as soon as possible once you become aware of your status change. The appeal should explain in detail the reason(s) for not meeting the standards of satisfactory academic progress, such as an extenuating circumstance under which you had no control and which can be documented.

Your statement should consist of two parts:

1. In Part I (CAUSE), explain what extenuating circumstance(s) prevented you from making satisfactory academic progress. Provide relevant dates and supporting documents from appropriate third parties, such as an academic advisor, instructor, doctor, counselor, clergy, etc.
2. In Part II (YOUR SOLUTION), clearly explain how the problem has been resolved and how you intend to meet progress standards in the future.

APPEAL CATEGORIES

Mark the box which most closely represents the reason for your appeal.

- ☐ **Death of an immediate family member** (immediate family members are typically considered a grandparent, parent, child, spouse, brother, or sister).

Part I. (Cause): Explain how their death affected your academic performance.

Part II. (Your Solution): Please explain what you have done to resolve the problem that prevented you from successfully completing your required credits. What steps have you taken to ensure you will complete the upcoming semester.

Part III. (Documentation): Provide documentation to support your claim.

- ☐ **Illness or injury.** You, your spouse, parents or your dependent children were injured or ill for an extended period of time.

Part I. (Cause): Include what date(s) the injury or illness occurred in relationship to your enrollment.

Part II. (Your Solution): What steps have you taken in case another illness or injury occurs to ensure you will be able to attend your classes and meet your academic obligations for the semester? Explain in detail.

Part III. (Documentation): Provide a statement from a healthcare provider.

- ☐ **Other extenuating circumstances.** You experienced an unusual situation in which you had no control. This unusual situation is not one of the categories above. Automobile accidents, marital conflicts, or withdrawal due to military service are examples of other extenuating circumstances.

Part I. (Cause): Explain the situation and how it affected your studies.

Part II (Your Solution): Describe a plan of action to address the situation.

Part III (Documentation): Attach supporting documents.

Completing The Appeal

Please indicate the term and year for which you would like to have your financial aid reinstated:

- ☐ Summer 2025_____ ☐ Fall 2025 _____
☐ Winter 2026 _____ ☐ Spring 2026 _____

Use additional paper, if needed, when answering questions.

- You will only be granted two approved appeals per lifetime at Southwestern Oregon.
- Have you previously submitted an appeal? Yes _____ No _____
- If yes, was your previous appeal approved or denied? Approved _____ Denied _____
- If you have previously submitted an appeal, please give a brief statement explaining why you are submitting your current appeal.

Please list all terms at Southwestern Oregon which you are appealing (INCLUDING terms in which you did not receive Financial Aid).

Terms with grades F, W	Reason for unsuccessful terms
Example: Summer 2025	Example: Hospitalization



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2025-2026

Satisfactory Academic Progress (SAP) Appeal

APPEAL DEADLINES

The complete appeal package should include this form, your personal statement and supporting documentation. Your classes will not be held if appeals are submitted and/or approved after your payment due date. Your classes may drop for non-payment if you do not pay for your classes out of pocket and a payment deadline passes. If this occurs, you will be responsible for re-registering for available classes. The processing time for appeals is approximately 7-10 business days from date of submission.

Educational Plan

Student's intent/goal (select one):

☐ AS/AA degree
 ☐ AAOT degree
 ☐ Certificate

Name of Program: _____ Anticipated date of graduation: _____

Please record the classes you intend to take for the next four terms or until your expected graduation date.

NAME:		STUDENT ID:		MAJOR:		CATALOG YEAR:	
First Year Summer 2025	Credits	First Year Fall 2025	Credits	First Year Winter 2026	Credits	First Year Spring 2026	Credits
Second Year Summer 2026	Credits	Second Year Fall 2026	Credits	Second Year Winter 2027	Credits	Second Year Spring 2027	Credits
Third Year Summer 2027	Credits	Third Year Fall 2027	Credits	Third Year Winter 2028	Credits	Third Year Spring 2028	Credits
Fourth Year Summer	Credits	Fourth Year Fall	Credits	Fourth Year Winter	Credits	Fourth Year Spring	Credits

Statement of Understanding

I understand that decisions on appeals are processed on a case-by-case basis. If approved, I will be expected to complete 100% of the courses for which I register, receiving only A, B, or C grades.

Furthermore, I have read SWOCC's Financial Aid Standards for Satisfactory Academic Progress. Students will be notified of the committee's decision. All decisions are final.

By initialing each item, you are indicating that you understand and agree to abide by the following conditions of the appeal if approved.

_____ If I cannot mathematically obtain the required cumulative 2.0 GPA and 67% completion rate within the four-term plan provided, my appeal will be denied

_____ I must receive only A, B, or C grades for each semester of approval.

_____ I must maintain a 100% completion rate for each semester of approval.

_____ I understand that I will only receive financial aid for the number of terms approved.

_____ If my financial aid appeal is denied, I will need to re-establish progress by taking courses in my program of study until I have earned a cumulative 2.0 GPA and completion rate of 67%. I will be responsible for making the appropriate financial arrangements to pay for tuition and fees.

After your appeal has been reviewed by the Office of Financial Aid, you will receive an email notification of the outcome in approximately two weeks. If your appeal is approved, you will be reconsidered for student aid resources. At the end of your term on financial aid probation you must be meeting the financial aid SAP standards or, if applicable to your situation, meeting the requirements of an academic plan. If an appeal is received after a term has ended, you will not be eligible for any Title IV aid in the term that has ended, even if the appeal is later approved.

Certification and Signature

An actual/wet signature is required on this document. Typed signatures will not be accepted and may result in the request being denied. By signing this form, you are certifying that all information and supporting documentation provided is factual and complete. This also acknowledges that you understand and accept the above terms regarding both approved and denied financial aid appeals.

Student signature:

Date:

Warning: If you purposely give false or misleading information, you may be subject to a fine of up to \$20,000 or imprisonment for up to five years or both according to the U.S. Department of Education.