



# BEAUFORT

COUNTY COMMUNITY COLLEGE  
Office of Financial Aid

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**2022-2023**

## Satisfactory Academic Progress (SAP) Appeal

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ BCCC Email Address: \_\_\_\_\_

Program of Study: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

Federal regulations require that you meet Satisfactory Academic Progress (SAP) standards to maintain your eligibility for federal financial aid. You must make progress toward a degree according to three standards: GPA, Completion Rate, and Maximum Timeframe.

Federal regulations allow students to appeal financial aid standings with proper documentation, only when special circumstances existed that caused a student to not meet one or more SAP standards. Special circumstances include:

- Death of an immediate family member or close relative (i.e. spouse, parent, grandparent, sibling, child, etc.)
- A serious injury or illness (physical or mental) that required medical intervention
- Significant, unanticipated family obligations due to medical issue or illness
- A catastrophic loss due to fire, flood, or natural disaster that affects the student's attendance or performance
- An unsafe or abusive environment
- Changes in personal circumstances (divorce, homelessness, loss of income, employment changes, etc.) that prohibit the student's successful completion of coursework
- Other extreme circumstances (case by case basis)

The following circumstances are not considered extenuating and beyond the student's control:

- Lack of knowledge/understanding of the BCCC SAP Policy
- Medical appeals for illness/injury that do not coincide with the semester(s) of sub-standard academic progress
- Work/scheduling conflicts (including voluntary overtime)
- Acclimation issues regarding being in a college setting
- If you've previously submitted an SAP appeal with the same extenuating circumstance(s) and you are still not meeting SAP requirements

Below is a list of possible circumstances and the suggested supporting documentation. Please note, the following list is not exhaustive. Providing an extenuating circumstance with supporting documentation from the list below does not guarantee approval. All appeals are reviewed on a case-by-case basis for legitimacy and merit.

Possible Circumstance	Suggested Documentation
Death of a family member or close relative	Obituary/Death Certificate
Serious injury or illness of you or family member	Documentation from you (or your family member's) medical provider or insurance provider
Military Duty	Official Military Orders
Unsafe or Abusive Environment	Police Records, Court/Legal Documents, Restraining Orders
Employment changes	Statement from Employer, Unemployment Statement

Students who wish to appeal their unsatisfactory financial aid status due to special circumstances, **MUST submit the completed SAP appeal form to the financial aid office PRIOR to the 10% point of the term for which a student is seeking reinstatement of financial aid.** Late appeals will NOT be accepted! Appeal decisions will be emailed to students BCCC email upon conclusion of the appeals committee review. All appeal decisions are final and cannot be appealed further at the college.

**SECTION A: TO BE COMPLETED BY THE STUDENT**

Please check the term for which you are appealing to have your financial aid reinstated:

- Fall 2022
- Spring 2023
- Summer 2023

Reason for Appeal (Check all that apply):

- Grade Point Average – Cumulative grade point average (GPA) below requirements
- Completion Rate - Completed less than 67% of attempted hours
- Maximum Timeframe

Discuss the circumstances that prevented you from meeting Satisfactory Academic Progress (SAP) while attending BCCC. Be specific about the events and the affected period(s) of enrollment. (Use separate page if needed)  
**Maximum Timeframe Appeal ONLY: Explain why you have exceeded the credit limit and provide documentation (Example: military credits transferred in, changes in program and reasons for change, etc.)**

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Discuss what has changed in your situation so you can now succeed at earning your degree, diploma, or certificate at BCCC. Describe the efforts or steps you have made which will now allow you to meet the academic progress requirements in your next term of enrollment. (Use separate page if needed)

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**STUDENT CERTIFICATION**

I understand that a decision regarding this appeal will be made taking all the information I have provided into consideration. If my appeal is approved, I will be expected to make SAP during my next term of enrollment which will be a semester under financial aid probation. If I have been enrolled in the most recently concluded semester, I am aware that my appeal will not be reviewed until my semester grades have been evaluated. I certify that the information I have provided is true and accurate to the best of my knowledge.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**SECTION B: TO BE COMPLETED WITH FACULTY/ADVISOR**

Student must meet with a counselor or faculty/advisor prior to having SAP appeal reviewed to discuss academic plan. Please have a counselor or faculty/advisor complete the section below.

Program Name: \_\_\_\_\_ Program Number: \_\_\_\_\_

Please list the classes recommended for the student to enroll in for the next semester:

Course Prefix	Section Number	Course Name	Credit Hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Semester Hours: \_\_\_\_\_

Please list the TOTAL HOURS REMAINING to complete the program (including hours listed above): \_\_\_\_\_

Advisor Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Advisor Name (Print)

\_\_\_\_\_  
Advisor Signature

\_\_\_\_\_  
Date

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**SECTION C: TO BE COMPLETED BY FINANCIAL AID OFFICE**

Academic Program: \_\_\_\_\_

Reason for Appeal (Check all that apply):

- Grade Point Average
- Completion Rate
- Maximum Timeframe

GPA: \_\_\_\_\_ Completion Rate: \_\_\_\_\_

Completion Rate Calculation:

Total Hours Attempted: \_\_\_\_\_ x .67 = \_\_\_\_\_ (Do not round) -  
Total Completed: \_\_\_\_\_  
Difference: \_\_\_\_\_ x 3 = \_\_\_\_\_  
Hours Needed to Regain CR: \_\_\_\_\_ (Round Up) = \_\_\_\_\_

Maximum Timeframe Calculation:

150% Hrs. of Program: \_\_\_\_\_ -  OK for Maximum Timeframe  
Total Hours Attempted: \_\_\_\_\_  Greater than 150% - Exceeded Maximum TF  
Remaining Hours Allowed: \_\_\_\_\_ -  
Hours Needed to Complete: \_\_\_\_\_  
Difference \_\_\_\_\_

Previous Appeal:  Yes  No      Number of Appeals Previously Submitted: \_\_\_\_\_

Documents Attached:  Yes  No

- Academic Transcript
- Program Evaluation

Financial Aid Representative: \_\_\_\_\_ Signature: \_\_\_\_\_

**SECTION D: TO BE COMPLETED BY SAP APPEAL COMMITTEE**

A decision has been made to  approve  deny the financial aid appeal for the student listed.

- Appeal approved for academic probation
- Appeal approved with recommendations. (See recommendations/comments)
- Appeal denied due to insufficient information.
- Appeal denied due to completion rate.
- Appeal denied due to grade point average.
- Appeal denied due to grade point average and completion rate.
- Appeal denied due to hours needed to graduate, which exceeds the 150% rule.
- Other: \_\_\_\_\_

Recommendations/comments:

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SAP Appeal Committee Chair: \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_