

Beaufort County Community College

Office of Financial Aid

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2019-2020

Satisfactory Academic Progress (SAP) Appeal

Student Name: Student ID:				
Address:	City:	State:	Zip:	
Phone Number:	BCCC Email Address:			
Program of Study:		Anticipated Graduation	Date:	

The U.S. Department of Education requires each school that participates in Federal Student Financial Assistance programs to establish minimum standards for measuring Satisfactory Academic Progress (SAP). Students who receive federal and state aid such as Federal Pell Grant, Federal Supplemental Educational Opportunity Grant, Federal Work-Study and NC State Grants must adhere to the SAP Policy.

Continued eligibility for financial aid is determined, in part, by maintaining satisfactory academic progress toward the completion of a degree program. Cumulative grade point average and the percentage of credit hours completed define satisfactory academic progress. In addition, students must complete their respective academic program(s) within 150% of the hours required. Students who fail to meet these academic progress standards are ineligible for federal and state assistance.

Federal regulations allow students to appeal financial aid standings under certain conditions with proper documentation. BCCC recognizes that mitigating circumstances may prevent a student from completing a semester successfully.

Students who wish to appeal their unsatisfactory financial aid status due to mitigating circumstances, must complete this form entirely and submit to the financial aid office prior to the beginning of the next term of enrollment. Mitigating circumstances include but are not limited to the following:

- A serious/prolonged illness or accident that contributed to your failure to maintain satisfactory progress.
- The death of an immediate family member. An immediate family member may include a parent, spouse, child or sibling.
- Other circumstances beyond your control.

Extenuating circumstances may be a serious illness or accident that prevented your from attending classes, domestic violence, change in personal circumstances (divorce, homelessness, loss of income, etc.), or other severe personal problems such as a medical or legal issue. It is strongly recommended that you attach supporting documentation.

Examples of non-appealable reasons are immaturity of the student in past years, being a single parent, transportation issues, lack of childcare, pregnancy, registering for more class than you are capable of completing or changing program of study multiple times.

Ensure the SAP appeal address each term for which you had withdrawals, incompletes or failing grades. Documentation should address each term for which you are appealing your academic progress. Additionally, Section C must be completed by your academic advisor. Electronic/digital signatures are not acceptable. Please provide ink signatures prior to submitting this appeal to the Financial Aid Office.

Student Name:	Student ID:
SECTION A: TO BE COL	MPLETED BY THE STUDENT
Please check the term for which you are appealing to have	
□ Fall 2019 □ Spring 2020 □ Summer 2020	
Reason for Appeal (Check all that apply): Grade Point Average — Cumulative grade point average — Completion Rate - Completed less than 67% of att Both Grade Point Average and Completion Rate Maximum Timeframe- Working on Second Program	rempted hours
Discuss the circumstances that prevented you from meet BCCC. Be specific about the events and the affected period	ting the Satisfactory Academic Progress (SAP) while attending od(s) of enrollment. (Use separate page if needed)
Discuss what has changed in your situation so you can not BCCC. Describe the efforts or steps you have made which requirements in your next term of enrollment. (Use sepa	•
SECTION B: STU	DENT CERTIFICATION
I understand that a decision regarding this appeal will be r consideration. If my appeal is approved, I will be expected a semester under financial aid probation. If I have been er	made taking all of the information I have provided into to make SAP during my next term of enrollment which will be prolled in the most recently concluded semester, I am aware ades have been evaluated. I certify that the information I have
Signature	Date

Student Name: Student ID:				
	SECTION C: TO E	BE COMPLETED WITH FACULTY/ADVIS	OR	
	ith a counselor or faculty or or faculty advisor com	advisor prior to having SAP appeal replete the section below.	viewed to discuss academic plan.	
List the total hours re- enroll in the next sem	_	o graduate and only the classes you re	ecommend for the student to	
Program Name:		Program Number:		
Please list the TOTAL	HOURS REMAINING to co	mplete current program:		
Course Prefix	Section Number	Course Name	Credit Hours	
		Total Semester Hours	::	
Advisor Comments:				
Advisor Name (Print)		Advisor Signature	Date	

SAP appeals must be completed entirely and received in the Financial Aid Office prior to the start of each academic term. Appeal decisions will be emailed to students BCCC email upon conclusion of the appeals committee review. All appeal decisions are final.

Student Name: Student ID:	
FOR FINANCIAL AID OFFICE USE ONLY	
Name of Program:	
Total Hours Attempted: Pell LEU:	
Completion Rate (Pace): GPA: 150% Hrs. of Program:	
Previous Appeal: Yes No Number of Appeals: Dates and Decisions of Appeals:	_
Documents Attached: ☐Yes ☐No	
☐ Academic Transcript	
☐ SAPV (Screenshot from Colleague)	
Reason for Appeal (Check all that apply): Grade Point Average – Cumulative grade point average (GPA) of 4.0	
☐ Completion Rate - Completed less than 67% of attempted hours	
☐ Both Grade Point Average/ Completion Rate	
☐ Maximum Timeframe- Working on Second Program of Study	
A decision has been made to approve deny the financial aid appeal for the student listed. Appeal approved. Student must receive a cumulative GPA of and an overall completion rate of 67%	<u>′</u>
at the end of the probationary semester.	,
$\ \square$ Appeal approved with recommendations. (see recommendations/comments)	
\square Appeal denied due to insufficient information.	
\square Appeal denied due to completion rate.	
\square Appeal denied due to grade point average.	
\square Appeal denied due to grade point average and completion rate.	
\square Appeal denied due to hours needed to graduate, which exceeds the 150% rule.	
☐ Other:	
Recommendations/comments:	
	_
FA Reviewer: Signature:	_
Title: Date:	