Deadline to Submit Appeal: Summer- May 30th, Fall- July 3rd, Spring- January 7th

Appeal Instructions:
If you have experienced extenuating circumstances that caused you not to meet the Satisfactory Academic Progress (SAP) Standards, you may submit an appeal to have your circumstances reviewed by the SAP Committee for reinstatement of financial aid. You must also provide the following: (1) a clear explanation of why you failed to meet the standards; (2) documentation to support your appeal statement; (3) Your plan of action that will ensure future academic success; and (4) Fail Max Time only - Your Academic Advisor must complete Section 2 of the appeal form.

The appeal and all supporting documentation should be submitted to the Financial Aid Office by the deadline listed above for the semester that you are planning to attend. Incomplete appeals will be denied. Appeals received after the deadline will be reviewed for the next semester. *No Exceptions*

Extenuating circumstances are situations that occur beyond your control. They are UNAVOIDABLE and UNFORSEEABLE. Your lack of compliance with the Satisfactory Academic Progress guidelines had to result from those direct extenuating circumstances. Examples of extenuating circumstances and documentation are:

(1) Medical Problems (physical or mental) – Official statement on letterhead from your physician, hospital or professional counselor which indicates the duration of the illness, whether the medical or mental condition is under control and whether you are able to attend school;
(2) Accident/Injury – The Police Report, statement from physician or hospital to support the date of your accident and/or injury, any medical problem(s) that resulted and whether you are able to attend school;
(3) Death of Immediate Family Member – Loss of an immediate family member (parents, grandparents, siblings, spouse, and children) must be documented; examples of documentation may include, but not limited to, an obituary, death certificate and/or death announcement. If loss is extended family, please provide notarized statement of significance.
(4) Other Extenuating Circumstances – Clearly describe your extenuating circumstance, and the duration of the problem that you suffered. Documentation may include, but not limited to notarized statement(s) or letters from professional sources indicating circumstances have improved or been resolved.

Appeal Decision:
Please include ALL documentation you wish to be considered with this form. It is your only representation before the SAP Committee, as you will not be able to meet with the anonymous committee face to face. The committee will not review an appeal until all the requested information has been received. Your “myTSU” account will be updated accordingly. You will receive a written response after your completed appeal has been reviewed. Filing an appeal does not guarantee Financial Aid reinstatement. The appeal decision will be based on the strength of your appeal statement, documentation received, and your academic record. If your appeal is denied, you will be required to make payment arrangements in order to pay fees. A reason will not be given for denied appeals. You may turn in a second appeal with a new letter and if there is additional documentation to provide.
Financial Aid Satisfactory Academic Progress Appeal Form
Tennessee State University
3500 John A Merritt Blvd. - Nashville, TN 37209-1561

TO BE COMPLETED BY STUDENT: Submitting Form Does Not Guarantee Reinstatement of Financial Aid

TERM: [ ] FALL [ ] SPRING [ ] SUMMER
Name: ____________________________________________ TSU ID#: T________________
(Please Print)
Address: ____________________________________________
City/State: __________________________________________ Zip Code: __________
Phone #: (____) ______________________ Email: __________________________

Step 1: Attach a letter clearly explaining the extenuating circumstance(s) that caused you to fail the standard(s). Submit all supporting documentation with your letter.

Step 2: Explain what has changed and your plan of action that will ensure your future success academically. Use a separate sheet of paper if needed.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Step 3: Student Certification and Signatures

I certify that the information I have provided is true and complete to the best of my knowledge. By completing and submitting this form I certify that: (1) I have reviewed the SAP policy and understand I do not meet SAP standards required for financial aid; (2) I understand that the submission of an appeal does not guarantee approval; (3) my financial aid may not be reinstated for this semester and future semesters; (4) I agree that the courses I am taking during this enrollment period count toward my degree requirements; (5) my SAP status will be recalculated at the end of each term, including summer; and (6) I am responsible for any charges incurred during period(s) of ineligibility.

Student’s Signature_________________________________________ Date __________________

******************************************************************************
[ ] APPEAL DENIED [ ] APPEAL PENDING [ ] APPEAL APPROVED
_____APGPA _____APHRS_____APBTH

COMMENTS: __________________________________________________________

________________________________________________________________________

Revised 3/25/2014
FOR “MAX TIME” APPEALS ONLY

Deadline to Submit Appeal: Summer- May 31st, Fall- July 31st, Spring- January 15th

Appeal Instructions:

You have reached the maximum amount of attempted hours that financial aid is allowed by federal regulations to provide assistance for the completion of an Associates, Bachelors or Graduate level degree. Students are allowed up to 150% of the number of hours required to complete that degree and still receive financial aid assistance. The additional amount of hours varies by degree and program. Please submit the max time frame appeal form to the Financial Aid Office by the deadline listed above for the semester that you are planning to attend.

Example: 120 hours (Bachelor’s degree) X 150% = 180 attempted hours to receive aid
   60 hours (Associate’s degree) X 150% = 90 attempted hours to receive aid
   40 hours (Graduate degree) X 150% = 60 attempted hours to receive aid

Once students have reached these attempted hours, a max time frame appeal form must be completed to determine eligibility for federal student aid, if any.

Appeal Decision:

You will not be able to meet with the anonymous SAP committee face to face. The committee will not review an appeal unless the form is filled out completely. Your myTSU account will be updated accordingly. You will receive a written response after your appeal has been reviewed. Filing an appeal does not guarantee Financial Aid reinstatement. The appeal decision will be based on your remaining financial aid eligibility, your academic record and the timeframe remaining to complete your degree. If your appeal is approved, it does not guarantee that financial aid will be available for the remaining hours you have to complete the program. If your appeal is denied, you will be required to make payment arrangements in order to pay fees. A reason will not be given for denied appeals. Satisfactory academic progress guidelines are reviewed annually and updated based on institutional policy and/or federal regulatory changes.

Incomplete appeals will be denied. Appeals received after the deadline will be reviewed for the next semester. *No Exceptions*
FOR “MAX TIME” APPEALS ONLY

TERM:  ____ FALL  ____ SPRING  ____ SUMMER

Name: ______________________________  TSU ID#: __________________

(Please Print)

Address: __________________________________________________________

City/State: _________________________________________________________ Zip Code: __________

Phone #: (____) ___________________  Email: __________________________

TO BE COMPLETED BY ACADEMIC ADVISOR
(An Incomplete Form Will Be Denied.)

Academic Evaluation
The student listed above is currently on financial aid suspension and is filing an appeal with the Financial Aid Office regarding his/her Satisfactory Academic Progress. An academic evaluation is needed below including the coursework to be attempted during the appeal semester to determine what counts toward the student’s program and study and what courses are required to complete the program.

Total Hours Required for Degree

Total Hours Attempted (Including Transfer Hours)

Total Hours Earned Toward Degree (Including Transfer Hours)

Total Transfer Hours Not Counted Toward Degree

Total Hours Needed for the Completion of Current Degree (Including Current Semester)

Recommended Courses for Appeal Semester:

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<th>Subject Code-course no. (ex: MATH-1010)</th>
<th>Course Title</th>
<th>Subject Code-course no. (ex: MATH-1010)</th>
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Academic Advisor Certification and Signatures
Your signature indicates that you have discussed expected graduation date, the remaining courses needed for graduation, and the recommended courses for the upcoming term with the student.

___________________________________________  ________  ________
Academic Advisor’s Name (Print)  Academic Department

___________________________________________  __________  __________
Academic Advisor’s Signature  Date  Extension

******************************************************************************

[ ] APPEAL DENIED  [ ] APPEAL PENDING  [ ] APPEAL APPROVED

___APGPA___APHRS___APBTH

COMMENTS:

Revised 3/25/2014