

Return To:
Financial Aid Office
Phone: (615) 963-5701
Fax: (615) 963-7540



Tennessee State University
3500 John A Merritt Blvd
Nashville, TN 37209-1561

DEADLINES TO SUBMIT APPEAL: Summer- May 24th, Fall- July 15th, Spring- January 2nd

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 possible 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)** your Academic Advisor must complete Section 2 of the appeal form, if applicable (Fail Max Time only).

The appeal and all supporting documentation must 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. 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 complete 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.

Sapappeal.doc (2/2013)

Tennessee State University
Financial Aid Satisfactory Academic Progress Appeal Form
3500 John A Merritt Blvd
Nashville, TN 37209-1561

SECTION 1

TO BE COMPLETED BY STUDENT

(Submitting This Form Does Not Guarantee Reinstatement of Financial Aid.)

TERM: ___ FALL, ___ SPRING, ___ SUMMER	
Name: _____ (Please Print)	TSU ID#: T_____
Address: _____	
City/State: _____ Zip Code: _____	
Phone #: (____) _____ Email: _____	

If **FAIL MAX TIME FRAME, skip Steps 1&2, sign Step 3, and proceed to SECTION 2 **

Explanations Can Be Submitted on a Separate Piece of Paper:

Step 1: Clearly explain the extenuating circumstance(s) that caused you to fail the standard(s)

Step 2: Explain what has changed and your plan of action that will ensure your future success academically.

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 have fallen below the acceptable SAP standards required for financial aid; (2) I understand that the submission of an appeal does not guarantee approval and that my financial aid may not be reinstated for this semester and future semesters; (3) I agree that the courses I am taking during this enrollment period are acceptable toward meeting my degree requirements and the SAP standards; (4) my SAP status will be recalculated at the end of each semester, including summer and (5) I am responsible for any charges incurred during period/s of ineligibility

Student's Signature _____ **Date** _____

(SECTION 2 is a separate sheet that only FAIL MAX TIME FRAME students need to complete)

-----OFFICE USE ONLY-----

[] APPEAL DENIED

[] APPEAL PENDING

[] APPEAL APPROVED

___APGPA ___APHRS ___APBTH

COMMENTS _____

SECTION 2 TO BE COMPLETED BY ACADEMIC ADVISOR or DEPARTMENT HEAD

Student's Name _____ T# _____

(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 or her Satisfactory Academic Progress. An academic evaluation is needed for the completion of all the needed documentation, signed and maintained by the academic advisor including the coursework to be attempted during the appeal semester.

Major _____ Expected Graduation Date _____

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:

Subject Code-course no. (Ex: MATH-1010)	Course Title	Subject Code-course no. (Ex: MATH-1010)	Course Title

Academic Advisor Certification and Signatures

Your signature indicates you have discussed with the student his/her current status and expected graduation date, as well as acknowledging that the courses listed above are acceptable for the current semester of appeal.

Academic Advisor's Name (Print)_____
Academic Department_____
Academic Advisor's Signature_____
Date_____
Extension