UCDAVIS HEALTH

Financial Aid Office 4610 X Street, Suite 1202 Sacramento, CA 95817 health.ucdavis.edu/financial aid/

Satisfactory Academic Progress (SAP) Appeal Instructions

Per the US Department of Education, regulatory citation 34 CFR 668.34, institutions participating in awarding federal aid are required to monitor students' progress to ensure that aid recipients maintain standards of reasonable progress towards completion of their degree. This entails both pace to degree and earning satisfactory grades. For details on our Satisfactory Academic Progress Policy, visit our website <u>HERE</u>.

Appeal Process: Students deemed ineligible to receive financial aid for not meeting satisfactory academic progress (SAP) and who have extenuating circumstances beyond their control may submit an appeal to the Financial Aid Office. Examples which may be considered: death of a family member, the student's own serious illness or injury, approved medical withdrawal, compulsory military duty, an extreme personal hardship, or such. Appeals will NOT be viewed favorably for reasons such as: situations that could have been anticipated, dissatisfaction with course materials or instructor, lack of motivation, participation in extracurricular activities, or unit overload.

Note: Appeal review may take up to 2-4 weeks. Notification of the appeal decision will be sent via email. *Incomplete appeals will be returned and may be denied without further review*. If registered for classes or intend to register for classes, <u>the student is responsible for paying any registration fees by the payment</u> <u>deadline</u>.

STEP 1: Download, complete, sign and date the Satisfactory Academic Progress (SAP) Appeal Form

STEP 2: <u>Submit a typed, signed, and dated statement of explanation</u>. Your statement should not **exceed two pages** and must clearly include/address the following:

- 1. Detail the circumstances which were beyond your control preventing you from meeting the satisfactory academic progress standards.
- 2. Detail your responsibility for these events.
- 3. Describe how your circumstances have changed so that future academic success will be maximized.
- 4. Describe the steps you have taken which will help ensure you will make satisfactory academic progress in the future.

STEP 3: Attach Supporting Documentation

Depending on your circumstances and the nature of the appeal, submit supporting documentation, (e.g., letter from your doctor, copy of a death certificate, Committee on Student Progress letter(s), or Individualized Learning Plan, support letter from an academic advisor or coach, etc.). A personal statement of explanation will not be accepted as "supporting documentation."

SAP Appeals for those **not meeting minimum grade requirements** <u>must include</u> details of how/when a student might remediate any necessary coursework and how/when improvement in grades or removal from probation is expected. This should include an explanation of changes in the student's expected graduation date. (This may come in the form of a summary from OSLER for Medical students or an Individualized Learning Plan for Nursing students).

SAP Appeals for those **not meeting minimum pace or exhausting the maximum term limit** <u>must include</u> details of how/when a student might remediate/retake any necessary coursework and how/when the student is expected to move forward in her/his progress. This should include an explanation of changes in the student's expected graduation date. (This may come in the form of a summary from OSLER for Medical students or an Individualized Learning Plan for Nursing students).

SAP Appeals for **all circumstances** must include any and all additional supporting documents that further document the student's issues that inhibited progress, (e.g., letter from doctor, copy of a death certificate, etc.)



Financial Aid Office 4610 X Street, Suite 1202 Sacramento, CA 95817 health.ucdavis.edu/financial aid/

Satisfactory Academic Progress (SAP) Appeal Form

| Student's Name: | Student ID: |
|---|---|
| Address: | |
| E-mail: | Phone Number: |
| Brief reason for appeal, (e.g., course failure, lack of pro | progression/pace, other): |
| 1. Select degree program: | |
| School of Medicine | School of Nursing |
| MD MPH MHI | PA NP MEPN PhD |
| 2. Attach a statement of explanation (see instruct | ctions listed on the previous page). |
| 3. Attach supporting documents AND an academic plan (see instructions listed on the previous page). | |
| NOTE : submit your appeal in the following order: SAP a followed by any supporting documentation. Submit the <u>financialaid@ucdavis.edu</u> with a subject line of "SAP App | e appeal <mark>in one PDF document</mark> via email to <u>hs-</u> |
| Student Statement of Understanding | |
| My signature below acknowledges the following: | |
| Aid Office to verify any information submitted. I understand that the submission of this appeal that I will be responsible for any UC Davis account | nment(s) is complete and accurate. I authorize the Financial al does not guarantee reinstatement of financial aid and punt balance should I decide to continue enrollment. hay take 2-4 weeks (or longer) before a decision may be |
| | |

• I understand that I am responsible for paying my registration fees by the University payment deadlines specified in order to register for classes and/or avoid being dropped from my classes.

Date: _____