



**Financial Aid
Satisfactory Academic Progress
Maximum Timeframe Appeal Form
2023-2024**



FRIENDS
UNIVERSITY

Office of Financial Aid

RRAAREQ: SAPMX
SCAN: SAP - APPEAL

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EXAMPLES of unusual circumstances and supporting documentation are listed below:

Extenuating Circumstance(s)		Required Documentation (letters should be printed on a professional letterhead and signed/dated)
Work Related	➤ Required overtime or required schedule change	<ul style="list-style-type: none"> Letter from employer including effective date(s) and whether the increase in hours was mandatory
	➤ Reduced hours resulting in increased childcare need, layoff, job loss	<ul style="list-style-type: none"> Letter from employer Termination/separation letter
Medical Condition	➤ Serious illness or change in health status	<ul style="list-style-type: none"> Letter stating doctor advised period of home rest Record of doctor appointments Letter stating doctor advised reduced course load
	➤ Surgery/hospitalization	<ul style="list-style-type: none"> Letter stating doctor advised period of recovery Record of doctor appointments Copies of medical bills documenting illness/injury
	➤ Mental health issue	<ul style="list-style-type: none"> Letter from doctor, therapist and/or counselor
	➤ Dental emergency	<ul style="list-style-type: none"> Record of dental office visit(s) Letter from dentist Letter from dentist advising period of recovery
Student's Child(ren)	➤ Child's medical condition	<ul style="list-style-type: none"> Records from daycare/school that child was required to be kept home (include in appeal the reasons for which alternative daycare was not available and what the specific plan would be if this occurred again in the future). Records from doctor appointments Letter from doctor advising period of recovery
	➤ Daycare issue	<ul style="list-style-type: none"> Letter from daycare provider Letter from new daycare provider
Other Circumstances	➤ Death of a loved one	<ul style="list-style-type: none"> Obituary Funeral Program Letter from counselor
	➤ Eviction	<ul style="list-style-type: none"> Eviction notice Letter from transitional housing program
	➤ Assault/domestic violence	<ul style="list-style-type: none"> Police report Court documentation Letter from clergy, social worker, counselor and/or doctor
	➤ Other circumstances not listed	<ul style="list-style-type: none"> Requires supporting documentation



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Check below for which term you are submitting this appeal.

- *If a semester (or if you are enrolled in only one session within a semester i.e. Fall Session 1 or Fall Session 2) has already ended and you did not appeal within the stated deadline for that semester (or if you did not appeal two weeks prior to the session ending if you are enrolled in only one session in a semester), then you will be ineligible to appeal for that specific semester.*
- *If you are re-appealing, you cannot appeal for the same reason as your prior appeal.*

☐ Summer 2023 ☐ Fall 2023 ☐ Spring 2024

Please explain your reason for appealing your suspension. Your appeal must include:

- 1) Why you failed to make Satisfactory Academic Progress (SAP)
- 2) What has changed that will allow you to make satisfactory academic progress
- 3) Supporting documentation is REQUIRED – please attach to appeal form
- 4) A copy of your most recent Falcon Map
- 5) Your signature and your advisor's signature is REQUIRED on the last page of this form

PLEASE PRINT your statement on the space provided below or **TYPE** your statement and attach it to this form. If your printed statement is illegible then we will notify you to type your statement and it will be reviewed on the next appeal deadline. Your signature/date will be required on all typed statements.

1. Explain why you failed to make Satisfactory Academic Progress (SAP).

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



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- 2. Explain what has changed that will allow you to make Satisfactory Academic Progress (SAP) for the current semester and in the future. Your explanation must explain what has changed from the circumstances that happened in question #1 that will allow you to make SAP. Below are some examples listed:**

***Example 1)** My job has reduced my work hours and I am now working less hours which is at least 10-15 hours/week. This will now allow me time to focus on my homework assignments.*

Example 2) I am meeting with the Academic Resource Center twice a week for tutoring.

*(Please **DO NOT** discuss your need for financial aid in your appeal, as that is not a valid reason)*

[illegible]

- 3. Did you provide supporting documentation that pertains to your statement?**
 - If yes, then attach your supporting documentation along with this form and move forward to question #4.**
 - If no, then your appeal will automatically be denied.**
- 4. Did you attach a copy of your most recent Falcon Map?**
 - If yes, then attach a copy of your Falcon Map and move forward to question #5.**
 - If no, then you may obtain a copy of your Falcon Map from your academic advisor and attach it with your appeal form.**
- 5. If steps #1-4 have been fully completed, have you and your academic advisor signed the last page of this this appeal form?**
 - If yes, then you may submit your appeal form.**
 - If no, then your appeal will be considered incomplete and your appeal cannot be processed.**



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APPEAL DECISIONS

If your appeal is approved you need to be aware of the following requirements:

1. **You must only take courses that are listed on your current academic plan, if your course needs change you will need to submit a letter of explanation along with documentation from your academic advisor.**
2. **You cannot have any withdrawals, incompletes, or “F” grades.**
3. **You must achieve a semester grade point average of at least 2.0 for undergraduate students and 3.0 for graduate students. A higher GPA may be necessary to reach academic probation or good standing.**
4. **You must submit an updated Falcon Map at the conclusion of each semester.**

****Note:** Your academic plan will become invalid if the financial aid office determines at any point that it is not mathematically possible for you to achieve probation status while this plan is in effect.

At the end of each semester, the Office of Financial Aid will confirm your fulfillment of these conditions. Students who fail to meet the outlined requirements will not qualify for future assistance. If, however, students encounter new extenuating circumstance(s), not reported in prior appeals, an additional appeal would be appropriate and could receive consideration. Approval of a subsequent appeal would require a new academic plan. Remember, the financial aid office cannot guarantee favorable appeal decisions.

Finally, if your appeal is approved, the information in this document will represent a contract between you, the student, and the Office of Financial Aid. Therefore, you must read, sign and return this agreement to the financial aid office before you can receive financial aid.



CERTIFICATION STATEMENT/REQUIRED SIGNATURES

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____

Typed signatures cannot be accepted.

IMPORTANT: KEEP A COPY OF THIS DOCUMENT FOR YOUR RECORDS.

If you have any questions, please call (316) 295-5100 or (800) 794-6945, ext. 5100. You may submit this form in person, fax (316) 295-5703 or mail. Please be sure and encrypt any email that contains personal identifiable information (PII). We are unable to accept PII that has not been encrypted.

If you purposely give false or misleading information, you may be fined \$20,000, sentenced to jail or both.