

## Office of Financial Aid Services

183 Strand Union P.O. Box 174160 Bozeman, MT 59717-4160 www.montana.edu/wwwfa

Tel (406) 994-2845 Fax (406) 994-6962

## SATISFACTORY ACADEMIC PROGRESS APPEAL FORM

Name (please print)		MSU ID	
E-mail		Telephone	
progres disburs Standa incurre have th at MSU	ss. These were included in the Informati sement. These Satisfactory Academic Pr ards. The SAP policy is listed at <a financialaid="" forms="" href="http://www.nt.com/http://www.nt.c&lt;/th&gt;&lt;th&gt;lished guidelines (based on federal regulation) for evaluating your academic on Guide you signed off as having read as a condition of financial aid rogress (SAP) standards can be but are not the same as University Scholastic &lt;a href=" sap%20policy_web_8-12.pdf"="" www.montana.edu="">www.montana.edu/financialaid/forms/SAP%20Policy_web_8-12.pdf</a> . If you have , serious injury to self or family or some other extenuating circumstance, you mittee's only reference point regarding your desire and ability to be successful and includes appropriate documentation from valid sources. Incomplete appeals		
SUCCI	ESSFUL APPEAL REQUIREMENTS:		
2.	narrative should address the following:  a. The nature and timing of the cimaximum credit hour violation applicable credit limit. Be specioccurred over the course of modes of the circumstances that after resolution for how the circumstances c. What resources you intend to the Maximum credit hour violation appeals or department official. Medical docume billing statements that include supporting relationship of the individual to the students.	that contains a detailed description of the exceptional circumstances. The ircumstances (e.g. injury or illness, death of a loved one). A student with a must address the circumstances that prevented their graduation within the iffic when referring to credit amounts and time periods. If your deficiencies ultiple terms, please address performance issues over all terms in question. fected your ability to meet the standards have been resolved. A positive tances have been or will no longer be an issue should be included. use to prevent the circumstances from occurring again.  Perifying the circumstances in the personal statement (see item 1 above). In must include a completed Plan of Study Form signed by an academic advisor tentation may be from an authorized medical representative, insurance form or any dates. Supporting statements from an individual must specify the dent and be signed and dated. Documentation must be in written form. The tecontact references on a student's behalf.	
Family E statutes,	Educational Rights and Privacy Act (FERPA), a fed specify that the University may not release inform	data submitted with your application for financial aid are treated as confidential information. The leral law that protects the confidentiality of a student's educational record, and Montana State nation from a student's record to anyone outside the University without the express written financial aid, scholarship, and billing/account information.	
for Spr may tak	ing Semester and June 30 for Summer se se up to two weeks or more depending on the	e of Financial Aid Services no later than <b>November 15 for Fall Semester</b> , <b>March 31 ssion</b> aid consideration. Appeals received will be reviewed as soon as possible, but appeal volume at the time submitted. If you appeal has not been reviewed prior to the dent bill must be made with the assumption that you will have no aid.	
Student Signature:		Date:	