Oregon TECH SATISFACTORY ACADEMIC PROGRESS APPEAL FORM

Student Name:		Student ID:	
Phone Number:		Today's Date:	
Term for which you are seeking aid:		Academic Year:	

PLEASE SELECT THE SATISFACTORY ACADEMIC PROGRESS (SAP) STANDARD THAT YOU ARE NOT MEETING (CHECK ALL THAT APPLY):

☐ *Qualitative:* cumulative Oregon Tech GPA below 2.00   ☐ *Quantitative:* pace of course completion below 67.0%

1. ATTACH any relevant documentation of the circumstance that prevented you from meeting SAP (e.g. medical records). Complete three (3) terms of the planner on the back and have your academic advisor sign it.

2. ATTACH a ***detailed typed*** and **signed** explanation of the circumstances that caused you to either fall below a 2.0 GPA or fall below 67.0% on your pace of course completion (number of earned credits (divided by)/ number of attempted credits) and what has changed that will allow you to meet our SAP standards by next term.

3. Indicate whether your circumstance met the following criteria by checking each box below that applies:

   ☐ Extraordinary   ☐ Beyond your control   ☐ Interfered with your ability to perform academically
   ☐ Documented   ☐ Remedied

☐ *Maximum Credits*

1. ATTACH a signed statement which explains why you have accumulated so many attempted credits without earning your degree.

2. Complete the Financial Aid Maximum Timeframe Course Plan (on back) showing the remaining credits you must complete to earn your degree. **This Course Plan must be signed by your current officially assigned academic advisor and must include a print-out of your current DegreeWorks.**

Provide the current amount of your student loan debt and the amount of your monthly repayment using the Standard Repayment Option from **https://studentaid.gov/**and review the total amounts below that students are eligible for. This information will be listed on the Financial Awareness Counseling confirmation.

   a. Loan debt amount: _____
   b. Standard Repayment amount: _____

The outcome of your Satisfactory Academic Progress Appeal will be communicated to you in writing and sent to your OIT e-mail address. Second SAP appeals that cite the same reasons as your first appeal will not be approved.

Financial Aid appeals (SAP) will NOT be considered after Tuesday, 5:00 p.m. of the second week of the term.

Term Planner

Student Name:		Student ID:	
Major:		Expected Graduation Date:	

Message to Advisor:
This student is experiencing academic difficulty or is over the maximum credits allowed for their current major and has a hold on their financial aid. They need your cooperation in outlining a plan to improve their academic standing. The courses outlined below should count toward graduation.

Please send us your evaluation of this student's ability to succeed. We will use this information in making a decision to reinstate or suspend financial aid. Please send these comments with the student's name and ID number to:

Tracey Lehman
Director of Financial Aid
tracey.lehman@oit.edu

I have reviewed this term planner with the student

Advisor's Name: _____ Today's Date: _____

Signature: _____

Summer 20(____)		Fall 20(____)		Winter 20(____)		Spring 20(____)	
Course # & Name	*Crd*	*Course # & Name*	*Crd*	*Course # & Name*	*Crd*	*Course # & Name*	*Crd*
Total Term Credits		*Total Term Credits*		*Total Term Credits*		*Total Term Credits*	

Summer 20(____)		Fall 20(____)		Winter 20(____)		Spring 20(____)	
Course # & Name	*Crd*	*Course # & Name*	*Crd*	*Course # & Name*	*Crd*	*Course # & Name*	*Crd*
Total Term Credits		*Total Term Credits*		*Total Term Credits*		*Total Term Credits*	

Student: Please keep a photocopy of your planner for your personal records.