



## Satisfactory Academic Progress Plan



It has been determined that you will need more than a single semester in order to either meet the required overall 2.0 GPA and/or 66.66% completion rate overall to maintain your Financial Aid eligibility. To maintain eligibility for Financial Aid you must meet the conditions outlined in this Academic Plan until you meet the SAP requirements as defined in the SAP Policy.

**Student's Printed Name:** \_\_\_\_\_ **900#** \_\_\_\_\_

**Program of Study:** \_\_\_\_\_ **Expected Graduation Date:** \_\_\_\_\_

**Program Advisor's Name:** \_\_\_\_\_

**Instructions:** This agreement represents a contract between you and the Office of Financial Aid. You must schedule an appointment with your Program Advisor to complete this form. Both you and your Program Advisor must sign this form. Submit the completed form to the Financial Aid Office. No Financial Aid will be disbursed until this form is received and approved by the Financial Aid Office.

### **To fulfill your Academic Plan, you must:**

1. Achieve a semester GPA of at least a 2.5. A higher GPA may be necessary to reach good standing.
2. Receive passing grades in all completed courses.
3. "W", "WF", "WP", "IP", "F", or "I" are not acceptable grades. 100% attempted hours each semester is required. Failure to earn credit in all attempted hours will result in noncompliance with the SAP pace requirement.

### **This Academic Plan will remain in effect until either:**

1. You meet Satisfactory Academic Progress (SAP) requirements; **OR**
2. You graduate from your current program of study
3. Your enrollment exceeds the maximum timeframe required for your Program, based on attempted credit hours; **OR**
4. You fail to meet the terms of the Academic Plan

**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 the GPA and/or Completion Rate required for graduation within the 150% timeframe for your Program.

**Student Responsibilities:** Place your initials beside each line.

\_\_\_\_\_ I understand that I can only appeal once every three years.

\_\_\_\_\_ I agree to register for the classes I selected with the guidance of my Program Advisor.

\_\_\_\_\_ I agree to the requirements established in this Academic Plan.

I understand that I have the responsibility to follow this SAP Academic Plan. Failure to meet Financial Aid Satisfactory Academic Progress (SAP) requirements will result in the suspension of my Financial Aid Eligibility. The Plan reflects realistic and attainable goals.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

