

Petition for Reinstatement of Financial Aid Eligibility

Instructions:

If you wish to appeal the Satisfactory Academic Progress (SAP) policy measurement results, you must complete this petition. Review the enclosed copy of CSU Financial Aid Office Satisfactory Academic Progress Policy. We strongly advise that you meet with your academic advisor to discuss your academic progress. Petitions will be approved or denied based on your documented circumstances which may preclude you from making Satisfactory Academic Progress toward your degree. You will be notified of the result of the petition review in writing. If your petition is approved, you will be granted one (1) additional semester of probation status. If the petition results from having attempted more than the allowable number of credit hours (Maximum Time Frame), approval will result in a determination of the remaining credit hours for which you can receive federal financial aid. If your petition is denied, your federal aid will be cancelled and you will be responsible for any balance due created by that cancellation. **Your academic petition is separate from financial aid petition.**

Semester you are requesting reinstatement of financial aid is: Fall 20_____ Spring 20_____ Summer20_____

Student's Name	CSUID	Date
Student's Signature	() Primary Phone Number	Email Address

Cumulative GPA or Minimum Required Completion of Attempted Credit Hours:

If you are not meeting the SAP requirements for Cumulative Grade Point Average (CGPA) of 2.0, or completing 67% of your attempted hours, please respond to the following:

1. On the reverse side, please explain in detail the nature of your academic difficulties for GPA and Percent earned (indicate reasons such as medical, family, personal, etc.). Please include appropriate supporting documentation.
2. State why you believe it is possible for you to improve your past academic performance, and what corrective actions you have taken to improve your performance.

Maximum Time Frame:

If your academic records indicate that your attempted hours exceed 150% of the minimum credit hours required for your program, please complete the following information:

1. Indicate the term you anticipate completing your degree requirements: _____
2. On the reverse side of this petition explain why you have not yet completed your degree requirements.

To be completed by academic/college advisor:

This information is required to evaluate the number of attempted hours this student has accumulated (including transfer hours).

1. Indicate the **total number of credit hours required to receive a degree** in this program: _____
2. Indicate the Semester this student started his/her program of study: _____
3. How many **total hours are still required** for this student to complete a **degree in this program major**: _____
4. How many **total hours are still required** for this student to complete **general education requirements**: _____
5. If this student has transfer hours, how many of **those total transfer** hours apply to a **degree this program**: _____

College: _____ Department for Major: _____

Major Advisor Name and Title: _____ CSU Telephone: _____

Signature: _____ Date: _____

College Advisor Name and Title: _____ CSU Telephone: _____

Signature: _____ Date: _____

