Office of Student Financial Aid 14000 HWY 82W, MVSU 7268 Itta Bena, MS 38941



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Deadline

Satisfactory Academic Progression Appeal Application (SAP)

Instructions: Please complete this form to appeal your **Financial Aid Suspension**.

Term

(1) **COMPLETE**, type all information in the space provided, **(2) PRINT** Application **(3) MEET** with your Academic Advisor to complete Step 5, **(4) SUBMIT** completed application to the Office of Student Financial Aid. Failure to submit **all documentation** by the deadline could result in denial of your appeal.

Summer Fall Spring		May 20, 2024 August 12, 2024 January 6, 2025						
					Step 1: Student Infor	mation		
					APPEAL DECISION IS NEEDED	FOR (CHECK ONLY ONE):	Undergraduate	Graduate
Student's Last Name	First Name	MI	MVSU ID #					
Mailing Address		City/State	Zip Code					
Email Address		Cell Phone Number	Home Phone Number					
SAP Appeal Semester (Choos	e One) SummerYear	Fall Year	Spring Year					
Step 2: Reason for Fi	nancial Aid Suspensio	n						
Indicate below which situation	on applies to your academic d	lifficulty.						
Attach documentation M		onal from whom you ha ersonal statement must	we received advice or treatment. All include the dates of treatment and a					
Death/Illness: The de	ath or illness of an immediate fai	mily member (i.e. mother,	father, grandparent, sibling, or immediate					

family such as a related aunt or uncle) contributed to your lack of academic progress.

• Attach appropriate copies of medical records, death certificate, obituary, etc. Your personal statement must include your relationship to the immediate family member.

Military Service: You were required to report for active duty unexpectedly and had to withdraw.

• Provide a copy of official orders for active duty. Your personal statement must include your dates of deployment.

Other Unforeseen Events: An unexpected event occurred which affected your academic progress.

Personal statement must include an explanation of the extenuating circumstance(s) and include appropriate
documentation substantiating the reason(s) for lack of Satisfactory Academic Progress. Your personal statement
must include dates of occurrences and a resolution to the issues.

Note: Circumstances relating to the typical adjustment to college life such as working while attending school, financial issues related to paying bills and car maintenance/travel to campus, are not considered extenuating for purposes of appealing a financial aid restriction.

Last Name	First Name	MI	MVSU ID #		
Step 3: Personal Statement					
	Provide a detailed explanation of the special circumstances that prevented you from maintaining satisfactory academic progress. You must include specific dates as to when your special circumstance occurred. Answer in the space provided.				
what steps you have taken to		a factor in your futu	hinder your academic progress. Indicate re progress and what steps you will take		
					
Step 4: Student Certification					
Your signature certifies that the information provided is accurate and complete to the best of your knowledge. By completing and submitting this form: 1) you certify that you have reviewed the SAP policy and acknowledge that your current financial aid status is suspension and understand that if your SAP appeal is denied, you will not be granted financial aid for this semester and future semesters until you are once again meeting the SAP standards, 2) you and your academic advisor agree that the courses listed are acceptable toward the completion of your degree program, 3) your SAP status will be recalculated at the end of the semester.					
Student Signature		Date			

Last Name	First Name	MI	MVSU ID #			
Step 5: Academic Plan of Study (Completed by Academic Advisor)						
Current GPA	Major	Estii	mated Graduation Date			
 If approundergraph while on 	ot Meeting Cumulative GPA oved, student must pass all credit he aduate/3.0 graduate. Student also under this academic plan should be discust the withdrawal.	derstands that a con	nplete withdrawal from any semester			
If approplan sho	ot Meeting PACE (Cumulative Atte ved, student understands that a compl ould be discussed with an academic adv	ete withdrawal from risor and financial aid	any semester while on this academic d counselor <i>prior</i> to the withdrawal.			
	xceeding Maximum Timeframe (t tudent pursuing a double major or degr		<u>v Academic Advisor)</u> No			
• Did (or	will) this student change his/her major	? Yes	No If yes, when?			
• Total notation. The following guarantee List the specific course satisfactory academic.	d Graduation Dateumber of remaining credit hours need grid is required for all studer es. Carefully evaluate this plan as student progression. The student may lose aid elige; the SAP Academic Plan should detail sign	nts (to be completed to complete degrees will be expected to complete the complete the complete degrees and the complete degree degrees and the complete degree degrees and the complete degrees and the complete degree degrees and the complete degrees and the complete degree degrees a	leted by Academic Advisor) complete all courses listed below to meet re not met. List the most efficient plan for			
s	Courses Required for Appeal S ummerFall Year Year		Credit Hours			
Example: BI111			3			
	Total Credit Hour	'S				
Academic Advisor Si	gnature	Date				
Advisor Telephone N	Number	Advisor Er	mail Address			