

**FINLANDIA UNIVERSITY  
FINANCIAL AID OFFICE  
SATISFACTORY ACADEMIC PROGRESS APPEAL (SAP) FORM**

Name \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I am appealing to have my financial aid eligibility reinstated for the (circle one):

**Fall 2016**

**Spring 2017**

**Fall 2017**

Below please indicate which situation applies to your academic difficulty:

- ☐ **Medical:** If a personal medical problem contributed to your failure to maintain satisfactory academic progress attach a documentation from a medical professional from whom you have received advice or treatment.
- ☐ **Death/Illness:** If the death or an illness of an immediate family member contributed to your lack of academic progress, please attach appropriate copies of medical records, death certificate, obituary, etc.
- ☐ **Military Service:** If you have withdrawn due to military service, please provide documentation.
- ☐ **Other Circumstances:** Please clearly state the circumstances (not listed above) on the **attached page** and provide appropriate documentation

For office use only:

Incomplete Appeal Form Returned to Student on this date: \_\_\_\_\_

Complete Appeal Form submitted to committee on this date: \_\_\_\_\_

Appeal Officials signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Denial Reason:

Please describe how circumstances beyond your control resulted in your inability to maintain the academic standards outlined in Finlandia University's Satisfactory Academic Progress policy.

Please provide an explanation of what has changed that will allow you to make satisfactory academic progress in the future

Please indicate the specific documentation you will be submitting in support of your appeal.

This form is also available online at [www.finlandia.edu/financial-aid.html](http://www.finlandia.edu/financial-aid.html)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_