

**South Georgia State College
Satisfactory Academic Progress
Financial Aid Appeal Form**

Last Name First Middle Initial SS#

Street Address City State Zip

Telephone: _____ Email: _____ Hawk ID#: _____

I am appealing for the reinstatement of Financial Aid for the following term :

_____ **Fall** _____ **Spring** _____ **Summer**

Submit the completed form along with your appeal letter. In your letter of appeal, please explain the circumstances which affected your ability to maintain satisfactory progress and attach appropriate documentation.

Failure to provide such documentation will prevent a review of your appeal.

Please submit ALL of the following documents to be considered for an appeal.

Appeals will not be approved without sufficient supporting documentation.

- Completed Satisfactory Academic Appeal Form **AND**
- Brief letter explaining the ***mitigating circumstances**** that prevented you from maintaining satisfactory academic progress, and explain how will circumstances be different in the future to ensure that you will be able to maintain satisfactory academic progress **AND**
- Documentation to support the circumstances in your statement.

***Mitigating circumstances** are defined as unanticipated and unavoidable events or situations beyond a student's control that prevent him or her from successfully completing a course or meeting the terms of a prior appeal. Examples of mitigating circumstances could include (but are not limited to):

- Serious accident or illness of the student
- Serious illness or death of immediate family member
- Immediate family or financial obligations

Examples of unacceptable mitigating circumstances include (but are not limited to) withdrawal to avoid a failing grade, too many courses attempted, limited number of tests/assignments, disagreement with instructor, voluntary change in work hours or inability to continue attendance without financial aid.

I certify that I have read and understand the Standards of Academic Progress found at www.sgsc.edu.

Signature: _____ **Date:** _____

FOR OFFICIAL USE ONLY

Notes: _____

Appeal Decision: APPROVED : _____ (effective term _____) DENIED: _____

Reason for Denial: _____