

(Phone) 806.742.3681 (FAX) 806.742.0880 **RETURN TO:** Student Financial Aid Office PO Box 45011 Lubbock, TX 79409-5011 Student Financial Center | West Hall 301 or email directly to: finaid.sap@ttu.edu

Satisfactory Academic Progress (SAP) - Academic Advisor Form

It is <u>required</u> that the academic unit completes the advisor section before the financial aid office can review the appeal. Students submitting an appeal for 1st time requirement are NOT required to submit an advisor form. Please keep in mind that federal aid cannot be released until the appeal has been reviewed and approved, so it is important that we receive the required advisor form as soon as possible.

cannot be released until the soon as possible.	appeal has b	peen reviewed and appro-	ved, so it is impo	ortant that we receive	e the req	uired advisor	form as				
Student Last Name:				Student TTU R#:							
Student First Name:											
Term for Appeal:		☐ Fall ☐ Spring				□ Summer					
Deadline to Submit Complete Appeal:	10 calendar days (excluding federal holidays) prior to the last class day										
Student Type:		☐ Undergraduate ☐ Graduate				☐ Law					
Dual Degree Student?	☐ Yes (This form required by both academic advisors)						□ No				
Distance Learner		☐ Yes				□ No					
College:		Program / Major:									
	This sec	tion is to be comple	ted by acade	mic advisor / de	partm	ent chair					
Advisor Name/ Committee	Chair:	-									
Phone Number:			Email:								
Has the student been placed on a degree plan and/or been provided with any additional advice regarding the successful completion of degree requirements?							□ NO				
Is student making reasonable progress towards their degree?					☐ YES	□ NO					
What is the expected graduation date?											
Please describe the acaden	nic recovery	y plan for student.		ı							
Advisor Signature:				Da	ate:						
Davisian	This sec	tion to be completed									
Decision:	☐ Approved ☐ □				J Denie	Denied					



(Phone) 806.742.3681 (FAX) 806.742.0880 **RETURN TO:** Student Financial Aid Office PO Box 45011 Lubbock, TX 79409-5011 Student Financial Center | West Hall 301 or email directly to: finaid.sap@ttu.edu

Sat	isfactory	Academic Prog	gress (SAP) – St	uden	t Appea	l Form			
Student Name:					TTU	R#:			
Student Email:					Cell	#:			
Student Type:		ergraduate	☐ Graduat			☐ La			
Review the Satisfactory A	cademic l	Progress (SAP)	Policy outlined	l at <u>h</u>	ttp://ww	w.finan	<u>cialaid.ttu.edu</u>		
Section A: Student Inform	nation								
Is this your 1st SAP appeal requirement? (No Advisor Form for 1st requirement)					Yes		□ No		
Do you have a prior term balance?					Yes		□ No		
Have you ever been denied a SAP appeal?			□ Yes	Т	erm		□ No		
Provide the academic year	and semes	ster for which yo	ou are requesting	g an a	ppeal to	be consi	idered:		
☐ Fall	☐ Spring					□ Sun	mmer		
Deadline to submit appeal is 10 calendar days prior to the last class day (excluding federal holidays)									
If you are receiving Graduate TA/RA Fee Waivers the deadline is the 20th class day									
Section B: Student Staten									
 Please <u>TYPE</u> a letter answering the two items below and provide related documentation. Personal statements that do not provide sufficient information may cause your appeal to be delayed or denied. Documentation of your situation(s) must also be provided. Please provide details regarding the situation(s) that prevented you from maintaining Satisfactory Academic Progress. (Examples: Medical, Death, Divorce, Military Service, Exceeding timeframe, Change in Field of Study or Dual Major). Special Circumstances or withdrawal from all classes: Student maybe required to see a SAP Advisor. How has your situation(s) changed to allow you to demonstrate Satisfactory Academic Progress? (Examples: attend tutoring, adjusted work schedule, reduction in course schedule, etc.). 									
Section C: Acknowledgm	ent								
Did you complete/include the following:	Stude	ent Statement	☐ Supporting do	cumen	tation	Read	Appeal Requirements		
Additional information may b	e requested	d through the stude	ent's email.		<u>'</u>				
I certify that all of the inform incomplete or inaccurate info standards of Satisfactory Aca	rmation co	uld cause a delay							
Sign your Appeal. Only hand	lwritten sig	gnatures will be ac	ĺ						
Signature			Date						