



UNIVERSITY
of HAWAII
HILO

Financial Aid Office

SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL

FAO USE ONLY

Reviewed

Status: _____

Federal regulations require students to maintain satisfactory academic progress to be eligible for financial aid. It is your responsibility to stay informed of UH Hilo's satisfactory academic progress policy requirements and to monitor your own progress. Failure to meet these requirements will result in you being placed on financial aid suspension. In some cases, mitigating circumstances may have contributed to your failure to meet the requirements of the SAP policy. You may appeal your denial of financial aid by completing this form and submitting it along with all required documentation.

Name: _____ UH ID Number: _____

Email: _____ Phone Number: _____

For which term are you appealing the reinstatement of your financial aid? Fall Spring Summer Year: _____

Check the reason(s) for the loss of your financial aid eligibility:

Did not meet **minimum GPA requirement** (2.0 UG/PR, 3.0 GR)

Did not meet **75% cumulative completion rate/pace** (# cr. earned/# cr. attempted)

Have exhausted the **maximum number of attempted credit hours** (150% of your program requirements)

Explain in detail why you were unable to maintain the requirements of the Satisfactory Academic Progress Policy. Also explain in detail what has changed that will allow you to demonstrate satisfactory progress in the next enrollment period should your appeal be approved. *(If additional space is required, attach a separate sheet.)*

****PLEASE PRINT LEGIBLY IN BLACK OR BLUE INK****

Submit to: University of Hawaii at Hilo Financial Aid Office
200 W. Kawili Street • Hilo, Hawaii 96720-4091 • Phone: 808-932-7449 • Fax: 808-932-7459 • Email: uhhfao@hawaii.edu

ADDITIONAL DOCUMENTATION

Please indicate below if any additional documentation is being submitted with your appeal.

I **am not submitting** any documentation in addition to my appeal.

I **am submitting** the following supporting documentaion with my appeal:

Medical Documentation

Academic Plan (*for students appealing the loss of eligibility due to exhaustion of attempted credit hours*)

Other: _____

IMPORTANT NOTES

- The results of your appeal will be sent to you via email to your 'hawaii.edu' address. Please allow an average of 2-4 weeks to receive a response.
- You may view your updated SAP status through MyUH Services. Click on 'View My Financial Aid Information', then under 'My Eligibility' click on 'Academic Progress'. Select the appropriate Aid Year and you should be able to see your most current eligibility status.

STUDENT CERTIFICATION

I would like to have my financial aid eligibility reinstated. By signing below, I understand the following about the results of my appeal:

If my appeal is **APPROVED**,

- my financial aid eligibility will be reinstated on a probationary status for a specified term.
- future aid beyond the approved probationary term is conditional and will be based upon my academic performance for the specified term.

If my appeal is **DENIED**,

- I will be responsible to pay any current and/or future institutional charges (e.g. tuition, fees, dorm, meal plan, etc.) on my UH student account.
- I will be responsible for dis-enrolling myself (if I am currently enrolled in classes) to prevent any negative impact to my current academic or account status.

Signature: _____ Date: _____

****FOR FINANCIAL AID OFFICE USE ONLY****

Current SAP Status

Institution GPA:

Total Attempted Cr:

Completion Rate/Pace:

(Earned _____ / Attempted _____)

APPEAL DECISION

APPROVED

AAGPA

AAPACE

AABOTH

AAMAX

AAALL

AACOND

For Term:

Fall

Spring

Summer

Year:

Condition (for AACOND):

MAX term (for AAMAX/AAALL):

DENIED

Comments:

Appeal Reviewed By: _____

Date: _____

Updated ROASTAT: _____

Date: _____

Email Notice Sent: _____

Date: _____