APPEAL FOR REINSTATEMENT OF FINANCIAL AID ELIGIBILITY

Student, please indicate the semester and year for which you are petitioning for reinstatement. (Please ✓ only one box and indicate the year):  ☐ Fall  ☐ Spring  ☐ Summer  Year 20____

NAME __________________________________________ CSU ID __________________________

TELEPHONE NUMBER __________________________________________

The Financial Aid Satisfactory Academic Progress (SAP) Policy of Chicago State University (CSU) measures whether students are progressing at a reasonable rate toward the completion of their educational objectives. Students must be in compliance with the SAP Policy (Minimum Cumulative Grade Point Average, Minimum Completion Rate, and Maximum Time Frame components) in order to maintain continued financial aid/loan eligibility. Please refer to the full SAP policy for more detailed information.

You must complete the Appeal process, and the Appeal must be approved, in order for you to receive financial aid/loan funds, for each term so long as you are not meeting minimum SAP standards.

You must state, in the space provided below, what transpired that caused you not to progress in your studies at a reasonable rate to meet the minimum SAP standards and what steps you have taken to make sure that those factors are no longer a hinderance to your academic progression. Make your statement brief and to the point. The completed Appeal for Reinstatement of Financial Aid Eligibility form, along with an approved Academic Plan and a completed Review Form (meet with your Academic Advisor in order to obtain both documents), and any supporting documentation (if warranted) of mitigating circumstances, such as injury, illness, death in the family, or other special circumstances, which have limited your ability to meet the basic SAP requirements, must be submitted to the Office of Student Financial Aid. Once all documentation has been reviewed and a decision made, your academic progress status will be updated in CSU X-press. All decisions reached by the Office of Student Financial Aid are FINAL.

Please Note: Undergraduate students are limited to 30 credit hours of developmental course work attempted or earned while in pursuit of their degree. The 30 hours of developmental course work allowed will not be included in the 180 maximum number of hours.

(please reverse side if additional space is needed)

Student Signature ___________________________________________  Date ______________________

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

SAP ACTION TAKEN:  ☐ APPROVED  ☐ DENIED  TERM OF FA REINSTATEMENT:  ☐ Fall  ☐ Spring  ☐ Summer  Year 20____

Last Term Attended:  ☐ Fall  ☐ Spring  ☐ Summer  Year 20____  Cumulative GPA ________________

Term Review: ____________% = Earned Hours ______________ / Attempted Hours ______________  ☐ Indicate if over 150%

Comments ________________________________________________________________

FA Rep Signature ___________________________________________  Printed Name _________________________  Date ________________

Form Updated 11/21/2019