

## Satisfactory Academic Progress (SAP) Appeal Form

Student name: \_\_\_\_\_ SMC ID: \_\_\_\_\_

**Please input your cumulative GPA and Pace, as found on your SAP Assessment Details located on your GaelXpress Self Service Page in Financial Aid:**

Cumulative GPA: \_\_\_\_\_ Cumulative Pace: \_\_\_\_\_ %

**What obstacles prevented you from being successful in the previous semester?**

**What action steps do you need to take to overcome the next semester?**

**Name any on and off campus resources to help support your academic success.**

Please turn →

## Part 2: Academic Plan

**Student name:** \_\_\_\_\_ **SMC ID:** \_\_\_\_\_

**Student:** Meet with a Student Success Coach to develop a semester-by-semester academic plan that gets you back on track to meet Satisfactory Academic Progress requirements for GPA, pace, and/or maximum timeframe. The plan should be realistic for you to achieve and must show how you will get back to meeting satisfactory academic progress. We understand you may not be able to achieve this in a single semester. You will be expected to meet the plan laid out below. If the appeal is approved and you meet the plan below, you will not need to reappeal each semester. **If you fail to complete the units or fail to meet the minimum GPA expectation in the plan for a semester, you will be required to reappeal with a new academic plan, and it may lead to the loss of eligibility for future financial aid.**

**Plan for remaining coursework:** Please specify the number of units the student will register for and minimum required GPA for each semester until the student meets basic SAP requirements, starting with the current semester. The number of units and minimum GPA must be realistic and must get the student back to meeting the basic requirements for SAP Progress (2.0 GPA, 67% pace, and 150% maximum timeframe) by their expected graduation. If the plan does not fit, please attach an additional page.

Semester /Year											
Total Sem Units											
Semester Min GPA											

**Success Office Staff (Advisor or Coach) Comments (Optional):**

  
  
  

**By signing here, I certify that the information provided is accurate. I understand that the submission of this form does not guarantee the reinstatement of financial aid. I believe I am capable of successfully completing the academic plan and I commit to taking the action steps laid out.**

**Student's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**By signing here, I certify that the academic plan outlined above should lead to completion of the degree objective within Satisfactory Academic Progress guidelines. I also confirm that the academic plan was created while considering if the student can successfully complete it.**

**Success Office Staff signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Staff Printed Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Please submit to the Financial Aid Document Uploader: <https://www.stmarys-ca.edu/forms/financial-aid/documents.html>