

**Satisfactory Academic Progress: Academic Plan**

**TERM:**

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| --- | --- |
| Name: | Student ID#: |
| Program of Study: | Program Advisor: |

**Check Student Type:** Regular Student Dual Enrollment

SAP Appeal Type: GPA/PACE **(\*complete sections A & B**) Maximum Timeframe (\***complete section B**)

GPA, PACE & Maximum Timeframe (\***complete sections A & B**)

**Section A. GPA/PACE**

\_\_\_\_\_\_ I understand that if my financial aid is approved, I must successfully pass all of my courses.

\_\_\_\_\_\_ I understand that if my financial aid is approved, I must have a term GPA of 2.2.

\_\_\_\_\_\_ I understand that if my financial aid is approved, I cannot withdraw from any courses.

\_\_\_\_\_\_ If I change my program of study from what is approved on my Academic Plan, I understand that I must receive a new Academic Plan from my advisor and meet with an Enrollment Advisor before the tuition and fee deadline for the semester. If I register for any courses outside of my program, I will pay for those courses without the use of financial aid. (Not applicable for Dual Enrollment)

\_\_\_\_\_ I understand that my progress will be evaluated at the end of each semester and I must adhere to the standards listed on my SAP appeal form in order to continue the academic plan. The requirements will remain in effect until all SAP standards are met.

\_\_\_\_\_ I understand that failing to comply with the terms and conditions of this Academic Plan will result in the termination of my financial aid for subsequent semesters.

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| **Student Signature:** | **Date:** |
| **Advisor Signature:** | **Date:** |

**Section B. Maximum Timeframe**

**Recommended Course Sequence**

**[\*\*\* To be completed by the Advisor for REGULAR STUDENTS ONLY\*\*\*]**

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| **Current Term:** | **Term:** | **Term:** | **Term:** | **Term:** |
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**Degree Works Plan:**

Advisors, please use the Degree Works Plan option. All remaining courses in the student’s program should be in the plan, including **Learning Support** and **second major courses**. **Incomplete Education Plans will not be accepted.**

**Student Initials:**

\_\_\_\_\_\_ I understand that if my Financial Aid Appeal is approved, my aid will be based on the required courses that are documented in my Academic Plan for my program of study (not applicable for Dual Enrollment).

\_\_\_\_\_\_If I change my program of study from what is approved on my Academic Plan, I understand that I must get a new Academic Plan from my advisor and meet with an Enrollment Advisor before the Tuition and Fee Payment Deadline for the semester.If I register for courses outside of my program, **I will pay for the courses without the use of Financial Aid** (not applicable for Dual Enrollment).

\_\_\_\_\_\_ I understand that my progress will be evaluated after each semester and I must be adhering to the standards listed on the SAP appeal form I signed in order to continue the academic plan into the next semester.

\_\_\_\_\_\_ I understand that failing to comply with the terms and conditions of this Academic Plan will result in termination of my Financial Aid for subsequent semesters.

\_\_\_\_\_\_ I understand that **if** my current GPA is **below** 2.0 GPA and my completion rate is below 66.67%, then I also have additional requirements to meet. I must pass all of my courses and have 2.2 GPA at the end of the term and cannot withdraw from any classes.

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| **Student Signature:** | **Date:** |
| **Advisor Signature:** | **Date:** |