

Student Name:

Hopkins ID:

Financial Aid Satisfactory Academic Progress Appeal for _____ Term

Use this form if you are appealing the loss of your financial aid due to failure to meet the Financial Aid Satisfactory Academic Progress (SAP) requirements. Complete this form and attach all additional documentation needed for your appeal. Please return to the Office of Student Financial Services, located in 146 Garland Hall. Appeals must be received at least 2 weeks prior to the start of the next term.

Requirements for Completing the Appeal Process:

- 1. Personal Statement:** Please provide a *typed and signed* statement indicating what went wrong during the preceding semester you were enrolled at Hopkins, what you did (and why) during time away from JHU (if applicable) and what you will do differently at Hopkins to ensure success in the upcoming semester. You must include a semester-by-semester plan for completing your degree requirements (see form, p. 2).
- 2. Documentation and supporting statements:** Provide documentation for your circumstances (see below), including evidence of a changed major if applicable. Supporting statements from third parties should be on professional letterhead and signed.
- 3. Academic Plan:** Work with your faculty advisor and the Dean's Office to complete the enclosed Academic Plan sheet.

Please indicate the mitigating circumstances that have contributed to your inability to meet SAP. Check any category that applies.

Submit the following supporting documentation based on your circumstances:

<input type="checkbox"/>	Serious illness or injury to student or immediate family member	<i>A statement from the physician and explanation of the nature and dates of the illness or injury.</i>
<input type="checkbox"/>	Death of an immediate family member	<i>A copy of the death certificate. Include the name of the deceased and their relationship to you.</i>
<input type="checkbox"/>	Significant trauma in a student's life that impaired their emotional and/or physical health.	<i>Include nature and dates of the trauma in your personal statement and provide documentation from a third party (JHU Counseling staff, physician, social worker, psychiatrist, police report, etc.).</i>
<input type="checkbox"/>	Other unexpected circumstances: _____	<i>Include the nature of the unexpected circumstances in your personal statement and provide any applicable supporting documentation.</i>

Submit all required materials in a single packet to the Office of Student Financial Services. Any missing information will delay the review of your request. Your appeal will be reviewed only by the Financial Aid Appeals committee in consultation with your academic advisor. You will be notified of the decision in writing by the Office of Student Financial Services.

CERTIFICATION STATEMENT

I have read the requirements for completing the appeal process and certify that all of the information I have provided is true and complete to the best of my knowledge. If necessary, I agree to provide further proof of the information I have submitted.

Student Signature _____

Date _____

Student Name: _____

Hopkins ID: _____

AAP & EP Graduate Student Satisfactory Academic Progress Plan

Expected Graduation Term: _____ Year: _____

The Academic Plan must be approved by the student's Academic Advisor. Students should work closely with their faculty advisor to select planned courses for each term, taking into account all prerequisites and whether a course is fall only or spring only. After the faculty advisor signs off on course selection, the student should Fax or Email a copy to the AAP Registration Office (202) 452-1970 or aapregistration@jhu.edu or EP Registration Office (410) 516-2300 or jhep@jhu.edu. If you need more room to build the academic plan, attach additional copies of this form.

Term:	Year:	
Courses	Credits	Antic. Grade
Faculty Advisor Approval:		Date:
<u>Academic Advisor Only</u>		
Pace:		
Target Semester GPA:		
Target Cumulative GPA:		
*Note: AAP & EP do not calculate GPA for transcript or other academic purposes		

Term:	Year:	
Courses	Credits	Antic. Grade
Faculty Advisor Approval:		Date:
<u>Academic Advisor Only</u>		
Pace:		
Target Semester GPA:		
Target Cumulative GPA:		
*Note: AAP & EP do not calculate GPA for transcript or other academic purposes		

- Below GPA Requirement:** To reach a minimum 3.00 cumulative / semester (circle one), the student must earn a minimum GPA of _____ per term, for _____ terms, while earning _____ credits per term.
- Maximum Time Frame Appeal:** To graduate with a _____ (degree) in _____ (major), the student must complete _____ additional courses.
- Complete Ration Rate (Pace) Appeal:** _____
- More than 2 unsatisfactory grades Appeal:** _____

Advisor Name (please print)

Advisor Signature

Date

Student Signature

Date