

**For Financial Aid Recipients with Unsatisfactory Academic Progress**

<b>SAP Appeal Term Requested</b> <input type="checkbox"/> <b>Fall 2025</b> <input type="checkbox"/> <b>Spring 2026</b> <input type="checkbox"/> <b>Summer 2026</b>
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Please complete all steps outlined on this form to appeal your federal financial aid ineligibility. Failure to provide a written explanation and supporting documentation (as applicable) may result in a denial or a delay in the decision of your appeal. You must print this completed Appeal Form and bring it to your meeting with the counselor/advisor.

**STEP 1: Student Information: Student must complete prior to meeting with Counselor/Advisor**

Name \_\_\_\_\_ Westmoreland ID# \_\_\_\_\_

Full Address \_\_\_\_\_

Primary Telephone # \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**STEP 2: Student Certification of Information**

By signing below, I certify and understand the following:

- The information I have provided is true and complete to the best of my knowledge. Furthermore, I realize that additional information may be requested by the Financial Aid Office to further support my appeal.
- Submission of the appeal does **not** guarantee federal financial aid eligibility. If I register for classes prior to receiving an appeal decision, it is my responsibility to make payment arrangements to secure my courses.
- By submitting an Unsatisfactory Academic Progress Appeal, I agree to work closely with my Counselor/Advisor to create an Academic Plan for success
- If my Unsatisfactory Academic Progress Appeal is approved and I am granted the SAP status of “Probation,” I must meet the following objectives in my next enrolled term to retain an additional semester of “Probation” status:
  - 1) Attempt and complete at least 6 credits (fall or spring) or 3 credits (summer)
  - 2) My term GPA must be a minimum of 2.3 or higher
  - 3) No Grades of a ‘W’ (Withdrawal), ‘MW’ (medical withdrawal), ‘F’ (F grade), ‘WF’ (WF grade) or ‘I’ (Incomplete) may be earned during my term of “Probation.”
- I can re-appeal my Unsatisfactory Academic Progress status when the above criteria have been met.
- Once a final decision has been reached regarding my appeal for federal financial aid, I will be sent an email notification. My SAP status will also be available on my student portal.

\_\_\_\_\_  
Student’s Signature (**Must** be signed in blue or black ink)

\_\_\_\_\_  
Date

**STEP 3: Appeal Information: Student must complete prior to meeting with Counselor/Advisor**

Your extenuating circumstances **MUST** meet at least one of the criteria in the chart below. **Please indicate which situation(s) best applies to you.** Appeals with **no extenuating circumstances** will be returned to the student and **will not be reviewed**.

Examples of appeal circumstances that **may be denied or not considered**: immaturity; poor choice of classes; employment obligations; financial difficulties; loss of transportation; personal or relationship problems; relocating; childcare difficulties; and incarceration.

<b>Extenuating Circumstance(s) that Apply</b>	<b>Required Documentation (Must Include Dates)</b>
<input type="checkbox"/> Illness or injury of me or a family member which prevented my attending class	Letter from doctor on doctor's letterhead or other acceptable medical documents.
<input type="checkbox"/> Death of a family member	Copy of death certificate or obituary.
<input type="checkbox"/> Traumatic life-altering event such as fire, flood, storm damage, etc.	Evidence of event such as copy of insurance claim or bill for repair/reconstruction.
<input type="checkbox"/> Military assignment or reassignment	A Statement of Service signed by, or by direction of, the adjutant, personnel officer, or commander of your unit or higher headquarters, which shows your date of entry on your current active duty period and the duration of time.
<input type="checkbox"/> Other circumstances beyond the control of the student (Must explain in detail the nature and dates of the unexpected circumstance)	Third party documentation of event on organization letterhead (i.e. licensed counselor, social worker, pastor, or teacher). No family members.

**STEP 4: Typed Explanation of Extenuating Circumstance(s) is REQUIRED**

Complete a **typed** explanation of why you were not able to meet SAP, using the text box on page 3. Be as detailed as possible.

***Answer the following questions relating to the extenuating circumstance(s) indicated above:***

1. Why you failed to make satisfactory academic progress?
  - What circumstances led to your financial aid ineligibility?
  - How might your behavior or actions have contributed to this?
2. What has changed?
  - What circumstances have changed in your life to increase your chance of academic success?
  - What impact do you foresee these changes having on your academic success?
3. What steps have you taken to ensure that the minimum standards will be met in the future?
  - What academic goals have you set for the semester, and what is your plan for achieving them?
  - What factors may potentially hinder your academic success, and how will you manage these factors? What supports or resources have you put in place, if any, to increase your academic success?

**TYPE your answers to questions #1, #2, and #3 below: Student must complete prior to meeting with Counselor/Advisor**

**STEP 5: Complete Academic Plan Form: Student must complete prior to meeting with Counselor/Advisor**

In order for an appeal to be considered, students must meet with a Counselor/Advisor to: (1) ensure they are able to mathematically meet the Satisfactory Academic Progress (SAP) standards at the end of a stated period of time and (2) to complete an Academic Plan Form, which places them back on track to meeting SAP. Students should meet and consult with their faculty advisor, when applicable, regarding appropriate selection and sequencing of courses.

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Program of Study \_\_\_\_\_ Expected Graduation Date \_\_\_\_\_

Check program level:       Certificate       Diploma       Associate's Degree

How many additional credits are **required** to complete this program(s) of study? \_\_\_\_\_

Is it mathematically possible for the student to meet SAP by the end of the next semester?

- \_\_\_\_\_ Yes      Student can meet the SAP requirements by the end of the next semester.  
\_\_\_\_\_ No      Student cannot meet the SAP requirements by the end of the next semester.

**Academic plan for subsequent semester: Student must complete prior to meeting with Counselor/Advisor**

**ADVISOR/COUNSELOR MUST REVIEW AND APPROVE**

Semester/Year: \_\_\_\_\_

Course	Anticipated Grade

**Counselor's/Advisor's recommendations:**

- Seek help of instructor
- Reduce course load
- Follow-up appointment
- Reduce work hours
- Referral to campus resource(s) (specify):
- Referral to community resource(s) (specify):

**Additional Comments (optional):**

Name \_\_\_\_\_ Westmoreland Student ID# \_\_\_\_\_

**COUNSELOR STATEMENT - PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS**

I certify that I have met with this student and agree that this plan will enable the student to return to good academic standing and/or meet the College's Satisfactory Academic Progress (SAP) guidelines.

_____	_____	_____
Counselor's/Advisor's Printed Name	Counselor's/Advisor's Extension	Date
_____	_____	
Counselor's/Advisor's Signature ( <b>Must</b> be signed in blue or black ink)	Counselor's/Advisor's E-Mail Address	

**STUDENT ACADEMIC PLAN STATEMENT - PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS**

I, \_\_\_\_\_ (PLEASE PRINT), acknowledge that I have read and understand the following requirements:

(INITIAL NEXT TO EACH REQUIREMENT TO CERTIFY THAT YOU HAVE READ AND UNDERSTAND EACH ONE.)

1. \_\_\_\_\_ I must complete my program of study within the maximum timeframe allowed (150% of the credits required to graduate from my program).
2. \_\_\_\_\_ I must successfully complete a minimum of 67% of all credits attempted each term.
3. \_\_\_\_\_ I must have earned a minimum cumulative 2.00 grade point average (GPA) to be eligible for graduation.
4. \_\_\_\_\_ I will adhere to the stipulations outlined in my academic plan.

I understand that if I fail to meet any of these requirements, I am not considered to be making Satisfactory Academic Progress and will be placed in Financial Aid Unsatisfactory Status.

_____	_____	_____
Student's Printed Name	Student's Signature ( <b>Must</b> be signed in blue or black ink)	Date

**Submit your appeal along with all supporting documentation, after meeting with your counselor, to the Financial Aid Office by electronic submission from your Westmoreland student email account to [financialaid@westmoreland.edu](mailto:financialaid@westmoreland.edu) (SUBJECT LINE: APPEAL), by uploading to your student portal, in person (Student Enrollment Center located in the Student Achievement Center), or by mail (Westmoreland County Community College, Financial Aid Office, 145 Pavilion Lane, Youngwood, PA 15697). The decision of the SAP Committee to approve or deny your SAP appeal is final and cannot be further appealed within the College or to the DOE.**

The timing of your Appeal review will depend on when your complete Appeal was received within a term. Please view submittal deadlines here: [https://westmoreland.edu/admissions\\_aid/financial-aid/receiving-aid/satisfactory-academic-progress.html](https://westmoreland.edu/admissions_aid/financial-aid/receiving-aid/satisfactory-academic-progress.html)