

## Financial Aid Plan for Satisfactory Academic Progress

\_\_\_\_\_  
Student Name

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

Federal Aid regulations stipulate that if you fail to meet Satisfactory Academic Progress (SAP) standards in whole or in part then your financial aid will be terminated. You exercised your right to appeal and based on your current academic record, you have been approved for federal student aid on the basis of your appeal. You will be required to adhere to the following Financial Aid Plan:

**The Financial Aid Plan requires that you successfully complete 100% of all attempted courses EACH semester, as well as receiving a grade of "C" or better in EACH course completed.**

Your progress will be monitored until: 1) you finish your academic program, 2) you exceed the maximum allowable hours for your program of study, or 3) you move back to Good SAP standing (whichever comes first). Please note that Good SAP standing for financial aid purposes is not the same as Good Academic Standing with the Registrar's Office.

Your financial aid award(s) will not disburse for the subsequent term, whether already awarded or not, until your current term grades have been reviewed by the SAP Review Committee. Your status will be reviewed after ALL grades have been posted and entered by the Office of Admissions & Records. You will see a SAP status of PLANRV until the review of your prior grades is complete.

By accepting financial aid from this date forward, you are agreeing to the Financial Aid Plan as stated.

### Student Certification

**I agree to this Financial Aid Plan for Satisfactory Academic Progress. I understand that the submission of this form does not guarantee my eligibility for aid, and that failure to follow and complete this plan will result in the loss of my eligibility to receive future aid. Additionally, certain students may only receive financial aid for specified courses. These students will have met with the Student Success Center or an Academic Advisor. Once this occurs, students will be unable to change their major. I acknowledge that this form MUST be returned to the Financial Aid Office before my financial aid award(s) will be disbursed for the subsequent term.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

Aid Year: \_\_\_\_\_ Term: \_\_\_\_\_

Date received: \_\_\_\_\_

Check: ROASTAT \_\_\_\_\_ RPAAWRD \_\_\_\_\_ RHACOMM \_\_\_\_\_ RRAAREQ \_\_\_\_\_