



FINANCIAL AID OFFICE
Satisfactory Academic Progress Appeal Form

You are no longer eligible to receive financial assistance at Sussex County Community College because you did not meet the standards of Satisfactory Academic Progress (SAP). Adherence to these standards is required of all financial aid recipients by Federal and State regulations governing academic progress toward the completion of a degree or certificate program.

You may appeal for a reinstatement of financial aid eligibility by completing this form. Appeals must be submitted in writing to the Financial Aid Office by the '10th day' of the semester for which you are requesting reinstatement of aid.

Name _____ SCCC ID _____
Address _____ City/State/Zip _____
Telephone/Cell# _____ Major/Program of Study _____

Semester requesting reinstatement of aid eligibility _____

Please check one of the following:

My academic difficulties were COVID-19 related. Some examples might include, you or a family member were ill, you had to take care of children or siblings who were now on home instruction due to pandemic school closures, your work schedule was altered due to the pandemic, you did not have reliable internet service for online courses, your experienced difficulty with courses that were moved to online instruction during the Spring 2020 semester, or another pandemic related issue. (No documentation is required, but you must attach a brief, SIGNED statement to indicate what your COVID related difficulties were.)

My academic difficulties were due to other reasons as outlined in my attached written and SIGNED statement. Please provide the following:

- A written, SIGNED statement outlining the reason(s) for your appeal.
The circumstances under which a student would be permitted to submit an appeal are: death of a relative, injury or illness of the student or other special circumstances.
What has changed in your situation that will allow you to demonstrate satisfactory academic progress.
Documentation to support your reason for appeal. (Medical notes from your doctor, or change of employment, etc.) Non-COVID related appeals will not be reviewed without documentation.

Mark the category that you are appealing:

Financial Aid Unsatisfactory Progress:

- Cumulative GPA is below 2.00 _____
Completion Rate is less than criteria _____

Table with 2 columns: Credits Attempted, Completion Rate. Rows: 0-12 (50%), 13-18 (60%), 19 and greater (67%)

Student Signature: _____

Date: _____

Send this form to: SAP Appeal Committee
Financial Aid Office
Sussex County Community College
1 College Hill Road
Newton, NJ 07860