

Texas State Technical College Waco



Office of Financial Aid
SATISFACTORY ACADEMIC PROGRESS APPEAL FORM
(Incomplete forms will be returned to you)

_____ ID/SSN _____
Full Name

Current degree/certificate (major)

Expected date of graduation (mo/yr)

For what semester are requesting financial aid reinstatement?

The purpose of this form is to determine whether or not there were mitigating circumstances to justify your not making satisfactory progress. It is the responsibility of your Financial Aid Office to ensure that the financial aid funds you receive are being used effectively.

Complete this form and return it to the financial aid Office. This appeal will not be reviewed until grades are processed at the end of the term. There will be at least three (3) working days after grades are processed before you will be notified, by mail, of the decision.

BRIEFLY state circumstances for not meeting the satisfactory progress requirements:

(continue to complete on back)

Please provide a complete plan of action.

What actions have you taken to resolve the issues that caused you to be placed on suspension?

How are you sure that similar issues will not be a factor in the future?

DOCUMENTATION REGARDING ABOVE CIRCUMSTANCES IS REQUIRED:
(Documentation could include letters from doctors, copy of death certificates, letters from instructors, counselors or other professionals who can substantiate the claim being made.)

Student Signature

Date

Financial Aid Director's Comments: APPROVED DENIED

Financial Aid Director's Signature: _____