

# Office of Financial Aid

6 Pennyfield Avenue • Throggs Neck, NY • 10465

Tel: 718-409-7200 • Fax: 718-409-7275 • Email: [financialaid@sunymaritime.edu](mailto:financialaid@sunymaritime.edu)

## Satisfactory Academic Progress Request for Review

STUDENT NAME \_\_\_\_\_

MARITIME ID# \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

EMAIL \_\_\_\_\_

Federal regulations require that schools monitor the academic progress of each applicant for federal financial assistance and that the school certify that the applicant is making [satisfactory academic progress](#) toward earning his/her degree. This determination of progress must be made after each payment period and before the college disburses any federal aid funds for the subsequent semester. Students who are not meeting the published standards will not be eligible to receive aid from any federal or state aid program.

### Right to Appeal:

You have the right to appeal any decision of ineligibility to continue to receive financial assistance. Your appeal must be filed within 30 days of notification that aid eligibility has been lost, and it must be made in writing to the Financial Aid Office. The appeal may not be based upon your need for the assistance OR your lack of knowledge that your assistance was in jeopardy. An appeal would normally be based upon some unusual situation or condition which prevented you from passing more of your courses, or which necessitated that you withdraw from classes. Examples of possible situations include documented serious illness, or severe injury, or death of a family member. If you do not have grounds for an appeal, or if your appeal is denied, you may be able to regain your eligibility for future semesters. This is done by enrolling at Maritime at your own expense – without federal (or state) financial assistance.

If you wish to appeal, please follow the instructions below. Complete this form and attach the following documentation:

### 1. LETTER OF EXPLANATION FOR REQUESTING AN APPEAL:

You must provide a signed letter of explanation detailing the date the problem occurred, the nature of the problem, how your studies were affected, and how the problem was resolved.

### 2. REQUIRED SUPPORTING DOCUMENTATION:

- A letter of support is required from someone who knows of your situation.
- If you or an immediate family member experienced a serious injury, illness or mental health condition, please attach a statement from your physician or mental health professional, reflecting date(s) of occurrence/treatment.
- If you experienced the death of immediate family member, please attach a copy of the death certificate, paper obituary/link to online obituary, or statement from physician.
- If you experienced other circumstances beyond your control, please attach documentation that supports the situation.
- An Academic Plan of Action developed with your advisor.

**REMEMBER:** All appeals **MUST** include the following:

1. This Appeal Form; 2. Signed letter of explanation; AND 3. Any relevant supporting documents (including your Academic Plan of Action). You will be notified of the appeal decision within 10 working days to your Maritime e-mail address.

**STUDENT CERTIFICATION:** I certify that I have read the Satisfactory Academic Progress Policy Guidelines.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

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## Satisfactory Academic Progress (SAP) Academic Plan

Students who have failed to achieve the minimum SAP standards are required to submit as part of the appeal process an academic plan listing the required courses for the stated program of study. Your academic advisor will help you formulate an academic plan. The academic plan should cover as many semesters as necessary for you to either meet the SAP standards per SAP policy or graduate from your degree program, whichever is earliest. **You must not withdraw from any of your classes and you must earn a satisfactory passing grade in each of the courses you are enrolled in in order to meet the terms of your SAP appeal.** You will need three copies of your academic plan: one for your academic advisor, one for the Financial Aid Office, and one for you to keep. The academic plan does not guarantee an approval of your SAP appeal. The student's progress will be reviewed each semester. Failure to meet the terms of the academic plan will jeopardize eligibility for federal aid assistance.

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

\_\_\_\_\_  
Maritime ID Number

Degree/Major/Profession Experience: \_\_\_\_\_

Expected Graduation Date: \_\_\_\_\_ Current Cum. GPA: \_\_\_\_\_

Total Earned Credits: \_\_\_\_\_

**Academic Plan Semester 1** Term: \_\_\_\_\_

Course Name	Course Number	Credit Hours

**Academic Plan Semester 2** Term: \_\_\_\_\_

Course Name	Course Number	Credit Hours

**Academic Plan Semester 3** Term: \_\_\_\_\_

Course Name	Course Number	Credit Hours

**Student:** *By signing below, you agree to adhere to the terms of this agreement to retain your eligibility for federal aid and you acknowledge that you have read and understand that failure to meet the terms of this agreement may result in the forfeiture of future federal financial aid eligibility for the following programs: Federal Pell Grant, Federal Supplemental Educational Opportunity Grant (SEOG), Federal Direct Student Loans (Subsidized, Unsubsidized, Parent PLUS and Graduate PLUS), and/or Federal Work-Study.*

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

Date \_\_\_\_\_

Academic Advisor Signature \_\_\_\_\_

Date \_\_\_\_\_

Academic Advisor Name (Please Print) \_\_\_\_\_

Extension \_\_\_\_\_