



UNF Office of Enrollment Services Processing Satisfactory Academic Progress Appeal For Consortium and Study Abroad

Name: _____ N#: _____
E-mail: _____ Current Phone #: _____

Term requesting Override: Fall _____ Spring _____ Summer _____
Year Year Year

The Higher Education Act of 1965, as amended, requires institutions of higher education to establish and apply standards of satisfactory academic progress (SAP) that all students must meet to qualify and remain eligible for assistance from Title IV student financial aid programs. Academic history is reviewed for all students applying for financial aid, regardless of whether financial aid has been previously received. At UNF, Satisfactory Academic Progress (SAP) is measured at the end of each semester. In order to receive federal financial aid funds, students must meet the 3 requirements, including:

1. Required completion rates (Pass Rate Rule- 67% of hours attempted)
2. Required grade point averages (GPA Rule- min. 2.0 for undergrads / min. 3.0 for grads)
3. Requirement of Maximum Time Frame (Max Hours/150% Rule – Students must complete degree program before reaching 150% of the number of credits needed to complete their degree program).

Hours and grades earned from other institutions as a part of Consortium and/or Study Abroad agreements must be evaluated to verify that the above listed SAP standards have been met.

I am submitting transcripts from my host institution(s). These transcripts represent the coursework approved by UNF. The grades I earned in these courses will be included in my hours attempted and will be included in future Satisfactory Progress reviews. I understand that these transcripts will be evaluated and my SAP status will be updated accordingly.

Please list host institution(s) _____

Student Signature: _____ Date: _____

For Enrollment Services Processing Use Only

Decision: Denied Accepted Need Add'l Information

GPA: Overall: _____ UNF: _____ Transfer: _____

Hours Earned: Overall: _____ UNF: _____ Transfer: _____

Hours Att'd: Overall: _____ UNF: _____ Transfer: _____

Ratio: _____

Comments Supporting Decision: _____

- Checked: ROASTAT
 RSIHIST / SHATRNS
 RPAAWRD
 ROAUSDF
 ROAIMMP (M/T)

Date of Review: _____

Reviewed by: _____