



# PRAIRIE VIEW A&M UNIVERSITY

A Member of the Texas A&M University System

## Spring 2023 Satisfactory Academic Progress Appeal Form

**Deadline: January 17, 2023**

**ALL DOCUMENTS MUST BE UPLOADED VIA PANTHER TRACKS**

A student may appeal the suspension of their financial aid eligibility resulting from failure to meet the Satisfactory Academic Progress criteria. The student can submit this form, which includes a completed **Spring 2023 Financial Aid Student Academic Plan** along with a *typed* explanation of their circumstance that caused their lack of academic progress and any supporting documentation by the close of business day on **January 17, 2023**. Please outline the changes you have made to prevent this situation from recurring. Be specific in your explanation. **Failure to submit adequate documentation upon initial submission will result in an automatic denial. ALL APPEAL DECISIONS ARE FINAL.** Please allow 10 - 15 business days for the appeal decision. A copy of the Satisfactory Academic Progress Policy can be found on the Prairie View A&M University Office of Student Financial Aid web site: <https://www.pvamu.edu/faid/financial-aid-policies/#sap>. **An appeal decision may impose limitations upon aid eligibility and/or future minimum academic standards.** You will be notified of the appeal decision via PV student email and/or Panther Tracks. **It is the student's responsibility to make other arrangements to pay any tuition & fees while appeal is being reviewed.**

Name: \_\_\_\_\_ PVAMU ID: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

City State Zip

Academic Level (select one) Undergraduate Graduate Doctorate

**DESCRIPTION OF POTENTIAL CIRCUMSTANCES AND REQUIRED DOCUMENTATION (Please check one)**

***Personal injury or illness of self***

- Statement (**must be typed**) of circumstances, detailing medical condition that impaired performance and why future academic performance will not be impaired by condition.
- Statement from doctor, health services, etc. detailing the medical condition that impaired academic performance. The statement should specifically address the following:
  - The student's limiting medical condition and date span for which conditions existed.
  - If the condition may have impaired academic performance.
  - If the student has rehabilitated to such an extent that the medical condition should not significantly impair future academic performance.

***Illness, injury or death of an immediate family member.***

- Statement (**must be typed**) of circumstances, detailing medical condition, how the situation impaired your performance, and why future academic performance will not continue to be impaired by the circumstances.
- Statement from doctor detailing medical condition incurred by family member.
- Statement should specifically address medical condition and date span for which the condition existed.   
If deceased - death certificate or obituary.

NAME _____	PVAMU ID# _____
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**COVID-19-** If your ability to maintain Satisfactory Academic Progress resulted from the COVID-19 pandemic, such circumstance(s) will be taken into consideration when evaluating an appeal for reinstatement of financial aid eligibility (*Circumstance(s) related to the coronavirus, including, but not limited to, the illness of a student or family member, compliance with a quarantine period, or a general educational disruption related to COVID-19 may form the basis of a student’s SAP appeal.*)

- Statement from student (**must be typed**) detailing COVID-19 circumstance(s) impairing **overall** academic performance and why future academic performance will not be impaired by circumstances.
- Supporting documentation of your COVID-19 related extenuating circumstance(s). Documents must include details of educational disruption and/or statement from doctor specifically detailing medical condition and date span for which the condition was incurred or existed for self or family member during the COVID-19 pandemic etc.
- If deceased, provide a death certificate or obituary.

**Other extenuating circumstance** (*Work does not qualify as an extenuating circumstance*)

- Statement from student (**must be typed**) detailing circumstance(s) impairing **overall** academic performance and why future academic performance will not be impaired by circumstances.
- Supporting documentation of extenuating circumstance.
- PV Place **Degree Works** print out (Must include course name(s) and course number(s)). ○ **Degree Works** print out must have expected date of graduation **if** within two semesters of completing your degree.

**Any student pursuing a 2<sup>nd</sup> degree or beyond: Please be sure your admission into new program is complete and updated by Admissions.**

- Statement (**must be typed**) from student detailing circumstance(s) impairing **overall** academic performance and why future academic performance will not be impaired by circumstance(s).
- PV Place **Degree Works** print out with expected date of graduation **if** within two semesters of completing your degree. (Must include course name(s) and course number(s)).

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

\_\_\_\_\_  
Date

*For Office Use Only:*

Current GPA: _____	Required GPA: _____	Total Hours Attempted: _____
Term last attended: _____		Total Hours Earned: _____
Approved: ____ Denied: ____	Other: _____	Completion Rate: _____%
Comments: _____		
Reviewed by: _____	Date: _____	

**SPRING 2023 FINANCIAL AID STUDENT ACADEMIC PLAN**

**Student:** Please take this sheet to your advisor to discuss the coursework you need to repeat and new courses in which to enroll. In addition, you should discuss credits and courses that you need in order to complete your declared major. Finally, discuss what additional study aids you will utilize to ensure that you are staying on-track this year. Study aids include those available through the Center for Academic Support, Student Academic Success Center and your Academic Department.

If your advisor is not available, you may go to the department chair. Keep in mind that a **Spring 2023 Financial Aid Student Academic Plan must be submitted as a component of your Satisfactory Academic Progress appeal packet.**

**Advisor:** Please provide your input to this student’s satisfactory academic progress. Prior to completing this section, please review the major plan with the student. The intent is to make sure the student is aware of requirements and is on-track to graduate with their declared major.

Student Name:  Student ID#

Student Major:

Projected graduation date:  Number of credits remaining to complete major:

Courses to be repeated (list semester/year to repeat)	Use additional space as needed.

**Courses in which student will enroll SPRING 2023 semester:**


**Courses in which student will enroll SUMMEr 2023/FALL 2023 semesters:**


**Academic support services to be used (estimate time commitment) Use additional space as needed.**


**Advisor:** Is the student's academic plan for the upcoming semester reasonable in terms of semester hours and class difficulty? \_\_\_\_YES \_\_\_\_NO If no, please explain:

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Please list any additional comments or recommendations to aid in the student's future success.

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**Student:** Do you understand your academic plan as outlined for the upcoming semester? \_\_\_\_Yes \_\_\_\_No

Do you understand that you will need to register for those courses listed above in order to successfully follow your academic improvement plan? \_\_\_\_Yes \_\_\_\_No

**SAP ACADEMIC PLAN REQUIREMENTS:**

If the student's Satisfactory Academic Progress Appeal is approved during the period that the student is placed on probation, the student must adhere to the probation requirements listed below. Failure to do so will result in the discontinuance of Federal Aid offered by the Prairie View A&M University Office of Student Financial Aid & Scholarships.

**The requirements for the probation are as follows:**

- You must maintain a minimum 2.00 GPA (undergraduate) or 3.0 GPA (graduate) for the semester and must pass all attempted hours enrolled for.
- Student cannot receive any F, I or W

By signing below, I acknowledge that I am agreeing to follow the above academic plan in order to attain Satisfactory Academic Progress **if approved**.

Student name (please print):  Date:

**Student signature:** \_\_\_\_\_

By signing below, I acknowledge that the student has read the academic plan and has had the opportunity to ask questions regarding attaining Satisfactory Academic Progress **if approved**.

Name of advisor (please print):  Date:

**Advisor signature:** \_\_\_\_\_