

# CIM Satisfactory Academic Progress (SAP) Appeal Form

This form is to be used to determine Federal Financial Aid eligibility in the event all Satisfactory Academic Progress GPA and Credits Earned deficiencies were not cleared at the end of the automatic Warning semester. There is no warning semester for the 150% Timeframe criteria. You will be notified in writing of the outcome of your appeal.

**Student Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_@case.edu\_\_\_\_\_

**Have you previously requested a Satisfactory Academic Progress Appeal?** \_\_\_\_ **Yes** \_\_\_\_ **No**

A student may submit a SAP appeal if there is an unusual and/or mitigating circumstance that affected their academic progress. Students who have their financial aid reinstated via a successful appeal will be placed on **Financial Aid Probation** for one semester. All previously deficient SAP standards must be met by the end of the Probation semester for eligibility to continue for the following semester.

**Please indicate the SAP issue that your appeal addresses:**

- ☐ Cumulative GPA below minimum
- ☐ Credits Earned in semester or cumulatively earned that are below the minimum requirement
- ☐ 150% Timeframe exceeded to complete program (more than 150% of the credits needed to complete program have been attempted). Note, there is no warning semester for this issue.

**The following MUST BE INCLUDED before your appeal will be considered:**

- ☐ A typed explanation of why you failed to meet the Satisfactory Academic Progress requirement(s). Please be specific with your explanation. Outline the steps you are planning to take to ensure future success at CIM, including expected coursework for upcoming semester.
- ☐ Attach any supporting documentation to help substantiate your appeal.

**This form is due by the end of drop/add (end of first week of classes) for the affected semester.**

**Student's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Return to:** CIM Office of the Dean, 11021 East Blvd., Cleveland, OH 44106  
**Fax:** (216) 707-4519  
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**Office use only:**

Approved \_\_\_\_\_ Denied: \_\_\_\_\_  
Reason for denial: \_\_\_\_\_  
Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_