



Satisfactory Academic Progress Appeal Form

To receive financial aid, students must meet the federal Satisfactory Academic Progress Standards. At Lake Michigan College, the following academic and completion standards apply to all students taking classes:

- **Maintain a cumulative GPA of 2.0 or greater.**
- **Successfully complete 67% of all attempted credits.**
- **Complete their designated program within 150% of the program length. For example, if a student is enrolled in a 60-credit hour program, they must complete the degree by taking no more than 90 credit hours. This may include credit hours that are transferred from other institutions.**

If a student does not meet these Standards, they will be placed on one semester of "Financial Aid Warning". The student will be eligible for aid during that term. If a student does not meet the SAP standards after the "Warning" semester, the student will lose financial aid eligibility.

A student can regain eligibility in one of two ways:

- **Meet the SAP Standards listed above** (raise their GPA or Completion Rate to meet the Standard).
- **File a SAP Appeal with the Lake Michigan Financial Aid Department that demonstrates extenuating circumstances.** Please note that not all appeals are approved. To be eligible, an appeal must demonstrate a situation that was beyond the student's control and be somewhat unique in nature. Examples of situations that are not eligible for an approval include: Didn't study/apply oneself; lost interest, just wasn't ready for college, etc.

To file an appeal, please complete the following steps:

- Complete the SAP Appeal Form.
- Provide a detailed letter explaining the extenuating circumstances that occurred, why the SAP Standards were not met during the timeframe in question, and what has changed in your circumstances that will now allow you to meet standards. Please provide an explanation for each term that SAP was not satisfactorily met.
- Meet with your Advisor to complete the appeal form and create an academic plan moving forward
- Submit* the SAP Appeal Form and all required supporting documentation to the LMC Financial Aid Forms email at faforms@lakemichigancollege.edu. **Forms are accepted either in paper, faxed scans or pdf only. Any submission of this form outside these formats, including web links and word documents, are not accepted. Submission of this form without a hand signed signature will not be accepted.*

You must meet with an advisor to finish completing the form. *Once the completed form and all pertinent information has been received by the Financial Aid Office, the appeal will be reviewed, and a decision will be communicated to the student within approximately 12 business days. Students submitting an appeal have the responsibility to regularly check the notifications on the Financial Aid page of their student profile for any potential updates from the SAP Committee. Incomplete appeals will not be accepted. Before submitting, please ensure all required information is filled out.*



First Name: _____ Last Name: _____ LMC Student ID: _____
LMC Email: _____

SATISFACTORY ACADEMIC PROGRESS APPEAL DOCUMENTATION

Check which best fits your situation	Include this type of documentation
<input type="checkbox"/> Death of an immediate family member (spouse, child, parent, sibling, or legal guardian of the student).	Obituary or death certificate. Please outline/document your relationship to the deceased.
<input type="checkbox"/> Change in work schedule* that occurred AFTER the semester began and substantially interfered with your ability to attend class. *Starting a new job does not apply.	A letter or other documentation from your employer on their official letterhead specifying the exact changes in your work schedule during the term being appealed.
<input type="checkbox"/> Medical Condition. This would include a licensed doctor diagnosed medical condition. This condition should not have been present/diagnosed at the beginning of the term <i>or</i> the condition must have worsened during the term being appealed.	Documentation must support the condition and include start/end date of the condition if appropriate. The doctor should state why you were unable to attend class. Additionally, the doctor should explain what has changed in your condition that would allow you to attend class in the future and be successful.
<input type="checkbox"/> Call to active military duty.* *Voluntary enlistment and subsequent call to duty during enrolled semester of appeal is not applicable.	Copy of your orders. To be considered, orders should be dated after the start of the term.
<input type="checkbox"/> Domestic abuse that required you to relocate for a period of time.	Documentation from a counselor or shelter facility.
<input type="checkbox"/> Exceeded Maximum Timeframe limit due to change of major (limit of 2), change in curriculum (per LMC program Director or Registrar), or other approved change per LMC program administrator.	Signed letter from an LMC staff, Registrar, Advisor, Program Director, or other approved 3 rd party.
<input type="checkbox"/> Other extenuating circumstance not specified.	Documentation from an independent, 3 rd party that would support your explanation.

*Along with all necessary supporting documentation, please attach an explanation/description of your situation and be sure to address what happened during each semester that you did not meet the SAP Standard. In the accompanying explanation, please also outline any improvements, changes or plans in place to improve your academic performance. The SAP Appeal Committee reserves the right to deny appeals for unsubstantiated extenuating circumstances. **Failure to provide information requested by the SAP Appeal Committee within the designated 14-day timeframe will result in the appeal being denied.***



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To Be Completed by the Advisor

Has the student received a degree or certificate from LMC in the past? ☐ Yes ☐ No

Does the student have a reasonable plan for success including manageable hours? ☐ Yes ☐ No

Current Degree: _____

A copy of the student's Academic Plan has been created in conjunction with the student and is active in DegreeWorks. Although courses are assigned to specific terms, based on course availability, the sequencing of courses is not a required part of the Academic Plan.

Advisor Name: _____

Advisor Signature: _____ Date: _____

Appeal Terms and Conditions

- I understand that the Appeal Committee reserves the right to deny SAP Appeals for unsubstantiated extenuating circumstances.
- I understand that failure to provide the requested information within the designated timeframe of 14 days will result in my appeal being denied.
- I understand that providing false information for the purpose of receiving financial aid is against federal and state regulations and could result in the mandated penalty.
- I certify that I have discussed my academic plan with my Academic Advisor and agree to follow it fully without exception.
- I understand that all communication, including the outcome of the appeal, will be communicated to me via my student profile under the Notifications tab of the Financial Aid page, and that it is my responsibility to check this account regularly, including checking my LMC student email for communications from the Financial Aid Office.
- I understand that if my appeal is approved, I must complete all courses in the term within the academic plan specified to me by the SAP Appeal Committee without exception. I understand that withdrawing from or failing any courses moving forward will be a violation of my appeal approval and will result in the loss of my financial aid.
- I understand that if approved, I must complete all courses with a C or better going forward. I understand that receiving a lower grade or an Incomplete (I) will be a violation of my appeal and would result in the loss of financial aid.
- I attest that all information I have provided for my appeal is true and accurate.

I, _____, have read, understand, and agree to all of the above terms and conditions.
(Student Name)

Student Signature: _____ Date: _____