



2009-2010 SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FORM

Name \_\_\_\_\_

Student ID# or SS# \_\_\_\_\_

CCC Student e-mail \_\_\_\_\_

Phone # \_\_\_\_\_

Address \_\_\_\_\_

For which term/year is this Appeal?  Summer \_\_\_\_\_  Fall \_\_\_\_\_  Winter \_\_\_\_\_  Spring \_\_\_\_\_

The Appeal process takes 14 business days. **Incomplete Appeals will be denied.** Log on to your my Clackamas account and check the My Documents tab for appeal results.

**SELECT THE REASON FOR APPEAL:**

- LATE GRADE:** My late grade is now posted on myClackamas, and I have at least a 2.0 Cumulative GPA. (Attach a copy of your grades.)
- STATUS CHANGE - WARNING to GOOD STANDING:** I have successfully completed a term of at least 6 credits (or the amount of credits for which I was previously paid), and have a Term GPA and Cumulative GPA of at least 2.0. What term did you successfully complete? \_\_\_\_\_ (Attach a copy of your grades.)
- STATUS CHANGE - DISQUALIFIED to WARNING:** I have successfully completed a term of at least 6 credits with my own resources and have a Term GPA and Cumulative GPA of at least 2.0. (Attach a copy of your grades.)
- STATUS CHANGE - DISQUALIFIED to WARNING:** I have extenuating circumstances that affected my ability to maintain minimum requirements.

**The following documentation must accompany this Appeal**

- A typed and signed statement explaining why minimum requirements were not met, if you have asked for tutoring assistance, and your plan of action and expected results
- Submit documentation of medical/family crisis (if applicable)
- Print your **Academic Evaluation** from your myClackamas Account
- Make an appointment with an Academic Advisor to review the Academic Evaluation and complete an **Educational Plan**

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

Date \_\_\_\_\_

**FOR FINANCIAL AID OFFICE USE ONLY**

- Appeal APPROVED:** Effective SU \_\_\_ FA \_\_\_ WI \_\_\_ SP \_\_\_  One term only
  - Return to **GOOD STANDING**
  - Return to **WARNING**
- Appeal DENIED:**  Remain on WARNING  Remain DISQUALIFIED

Comments: \_\_\_\_\_

\_\_\_\_\_ Cumulative GPA \_\_\_\_\_

FA Signature \_\_\_\_\_

Date \_\_\_\_\_

**Check your myClackamas account for all financial aid correspondence and your Award Letter**

Fax, e-mail, mail, or return this form in person to:  
Student Financial Services · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045  
Phone: 503-594-6082 Fax: 503-722-5864 · e-mail: [finaid@clackamas.edu](mailto:finaid@clackamas.edu)

[www.clackamas.edu](http://www.clackamas.edu)