

100 Arend & Nancy Lubbers Student Services Center One Campus Dr., Allendale, MI 49401

Phone: 616.331.3234 • Fax: 616.331.3180 • finaid@gvsu.edu

2024	1-202	5 Satisfactory Ac	cademic i	Progress (SAF	Graduat	te Appeal Form
Student 1	Name: ˌ			Student ID Nu	ımber: G	
Phone Number:			E-mail:	E-mail:		
•	onal info	ormation promptly. A deci	•			Please respond to requests Valley e-mail address in
Please su document		the completed form wi	ith the requi	red documentation	<b>n:</b> Your G# mu	st be included on all
yo er	ou must nsure th	f your grades if you have a also submit your official t nese credits are reflected i a meeting with your Acac	transcripts froi in your acaden	m the other institution in the other in the other institution in the ot	n to the GVSU	Admissions Office to
Please a	answer	r the following questi	ons:			
<b>W</b> hat te	rm are	you requesting aid?	□ Fall	□ <b>W</b> inter	□ Spring	□ Summer
What is	your a	nticipated graduation o	date?			
Reason y	ou are	not meeting SAP (plea	se check one	e): If you are unsure, §	go to myBanner,	Financial Aid, Eligibility.
		se the "GPA Calculator" c es you would need to reg				
□ <b>c</b>		<b>Earned:</b> Login to <a href="https://s">https://s</a> What is your total Outstan				
	o F	How many total credits ha	ve you earned	I (refer to your myPa	th)?	
□ <b>E</b> : date.	xceede	ed Max Hours: Login to	https://studen	taid.gov and review y	our federal stud	lent loan borrowing to
	o <b>V</b>	What is your total Outstar	nding Principal	Balance of all federal	loans?	
	o <b>V</b>	When will you have compl	eted all requir	ements for your degr	ree?	
	o F	Have you applied for gradua	tion? □ Ye	s 🗆 No		

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## Please answer the questions below on a separate, typed piece of paper.

**Please attach a personal statement** to explain why your appeal should be approved to reinstate your financial aid eligibility. Your personal statement must address all of the following questions. Before turning in your appeal to the Financial Aid Office, have someone else read it for flow, grammar and proper spelling.

- 1. What circumstances have caused you to lose your eligibility for financial aid?
- 2. What specific steps have you taken and/or what steps will you take in order to be successful?
- 3. What are your specific goals for the future?

Degree Plan & Advisor Signature: Please work with your Academic Advisor to complete the following table.

Fall / Winter / Spring/Summer	Fall / Winter / Spring/Summer	Fall / Winter / Spring/Summer				
course credits	course credits	course credits				
total credits	total credits	total credits				
Fall / Winter / Spring/Summer	Fall / Winter / Spring/Summer	Fall / Winter / Spring/Summer				
course credits	course credits	course credits				
total credits	total credits	total credits				
Advisor Signature:						
Advisor Print Name:						
By signing this worksheet, I certify that all of the information reported to qualify for federal student aid is complete and correct. I further understand that purposely giving false or misleading information may result in a fine, jail terms, or both.						
Student Signature:		Date:				

Please return your completed form and required documentation to the Office of Financial Aid & Scholarships. Be sure to include your name and G Number on all pages. Missing information may delay processing.

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