



Satisfactory Academic Progress Appeal and Reinstatement Agreement

Name: _____ MCC ID #: A _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone number: _____ Email: _____

Current Major: _____ Prior Major: _____

You may file an appeal if you did not meet Financial Aid Satisfactory Academic Progress standards due to extenuating circumstances. You must complete all steps.

Step One: This appeal is for fall semester spring semester summer semester

Step Two: What prevented me from making satisfactory academic progress at Middlesex Community College? (Review examples below and check all that apply):

_____ **Academic:** Not academically prepared; missed classes; did not complete assignments, etc.

_____ **Employment:** Had scheduling problems with work and classes; worked too many hours, etc.

_____ **Transportation:** Did not arrange for transportation; lost transportation after classes began, etc.

_____ **Childcare:** Did not have adequate child care in place; lost child care; could not afford child care, etc.

_____ **Health:** Missed classes due to recurring health issues; withdrew due to unexpected health crisis, etc.

_____ **Personal:** Family member's illness; family member's death, etc.

_____ **Other:** please specify

Step Three: For all items checked in Step Two; **explain your circumstances in detail**, what steps you took at the time to correct these circumstances, and why you were unsuccessful. Be sure to indicate when these circumstances occurred (semester and/or year). Also explain how these circumstances have been resolved and will no longer prevent your academic success. *Attach a separate **typed** page with your explanations and include necessary documentation.*

Step Four, Certification: I understand that I am not making Satisfactory Academic Progress (SAP) and therefore ineligible for all types of financial aid, including federal student loans. I understand that if I am granted reinstatement of financial aid, the reinstatement is granted on a semester-by-semester or academic year basis and that I must meet the following conditions to retain eligibility:

I must satisfactorily complete 100% of ALL courses attempted during the reinstatement period.

I must achieve a minimum 2.2 GPA in ALL courses attempted during the reinstatement period.

I must complete any "I" or "IP" grades from the previous semester by the end of this semester.

I understand that I will receive notification of the decision of this appeal by mail or email.

I understand that I can only receive financial aid for courses that apply to my major.

I have read, understand, and agree to all the conditions stated above.

Student signature

Date