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**2023-2024 Satisfactory Academic Progress Appeal**

**Federal Student Aid Programs**

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| Please Read: The Financial Aid Office will not review incomplete appeals. You must complete all steps of the appeal form. Please carefully read the directions for each step. MGCCC Financial Aid will not consider incomplete appeal forms or appeals submitted without documentation of extenuating circumstances. You will be notified of the approval or denial of your appeal via your MGCCC email account and Web Services. The College’s Satisfactory Academic Progress (SAP) Policy can be found online at mgccc.edu and in MGCCC catalog also available online. If you need assistance completing this form, please contact the Enrollment Services Center on the campus convenient to you. | | | | | | | | | | | | | | | | | | | | |
| **Student’s Name** | |  | | | | | | | | | | | **Student’s GCID (M#)** | | | | | |  | |
| **Student Email** | |  | | | | | | | | | | | **Student Phone Number** | | | | | |  | |
| **Semester of Appeal** | | |  | **Fall 2023** | |  | | **Spring 2024** | | |  | **Summer 2024** | | | | | | | | |
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| 1. **Discuss Extenuating Circumstances:** Please discuss the specific extenuating circumstances that prohibited successful completion of credits attempted as outlined by MGCCC’s SAP policy. **Documentation MUST be dated to show a relationship to the event described and semester(s).** Examples of extenuating circumstances include, but are not limited to, serious injury and/or illness, accident, death of an immediate family member, divorce, incarceration, loss of transportation, and military service. Examples of circumstances that are not considered extenuating include, but are not limited to, “I need six hours to graduate” and “I did not try.” **MGCCC Financial Aid will not review appeals that fail to discuss extenuating circumstances.**  (Attach additional pages if necessary) | | | | | | | | | | | | | | | | | | | | |
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| 1. **Documentatio**n: Attach documentation of the extenuating circumstances that prohibited successful completion of credits attempted during the period specified in Step 1. **Documentation MUST BE DATED to show a relationship to the event described and semester(s).** Examples of documentation include, but are not limited to, medical records, death certificates, obituaries, police and/or accident reports, divorce agreements, letters from professional counselors/pastors/attorneys, court orders, and military forms. **Appeals without documentation will not be reviewed and will be denied.** | | | | | | | | | | | | | | | | | | | | |
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| 1. **Circumstances changed/improved:** Please discuss how the circumstances provided in Step 1 have improved in a way that will not affect successful completion of your college degree. | | | | | | | | | | | | | | | | | | | | |
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| 1. **Graduation Plan or Checklist:** Meet with your advisor or an Enrollment Specialist to complete and sign a Graduation Plan or Graduation Checklist. List all coursework needed in order to complete a degree at MGCCC or transfer to a college or university. Include all courses in progress for the semester for which you are submitting this appeal. You must complete classes that apply toward your program of study, and you may not repeat courses unless a higher grade is needed to graduate. 2. **Developmental Studies Courses:** At your request, you may exclude developmental studies courses.   If you would like your developmental studies courses excluded, please check here . | | | | | | | | | | | | | | | | | | | | |
| *At the end of each semester, the student must meet SAP requirements and/or successfully following the above graduation plan. Students following a graduation plan must have a cumulative 2.0 GPA at the end of each probationary semester. Students who do not to meet these conditions will be placed on Financial Aid Suspension.* | | | | | | | | | | | | | | | | | | | | |
| **I (the student) certify that all of the information on this form and included as documentation is true and complete to the best of my knowledge. I understand that if I purposely give false or misleading information as part of this request that I may lose my financial aid and be subject to a $20,000 fine, a prison sentence, or both.** | | | | | | | | | | | | | | | | | | | | |
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| Student’s Signature | | | | | | | | | | | | |  | | Date | | | | | |
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| Attempted Hours: |  | | | | Completed Hours: | | | |  | | | Completion %: | | | | |  | | GPA: |  |
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| Approved |  | | | | Denied | |  | | |  | | | |  | | | |  |  | |
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| Comments |  | | | | | | | | | | | | | | | | | | | |
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