



Satisfactory Academic Progress (SAP)  
Appeal for Reinstatement Form  
Main Campus  
2024-25

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Trine email: \_\_\_\_\_@my.trine.edu Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_ -- \_\_\_\_\_

Federal regulations require that schools monitor the academic progress of each applicant for financial assistance and that the school certify that the applicant is making satisfactory academic progress toward earning his/her degree. This determination of progress must be made after each term and before the financial aid office disburses any financial aid funds for the subsequent semester. You will be responsible for any tuition and fees, other charges, including late fees, charged to your account while your financial aid eligibility is suspended. Submitting an appeal does not guarantee approval to reinstate your eligibility to receive financial aid.

Guidelines for Main Campus students can be found at:

<https://www.trine.edu/about/policies/documents/sap-policy.pdf>

Students who are not meeting these published standards will not be eligible to receive aid from any federal, state, or institutional financial aid programs.

### **Right to Appeal:**

You have the right to appeal any decision of ineligibility to continue to receive financial assistance. **Your appeal must be made in writing to the Office of Financial Aid a minimum of one week prior to the start of any term.** The appeal may not be based upon your need for the assistance OR your lack of knowledge that your assistance was in jeopardy. An appeal would normally be based upon some unusual situation or condition which prevented you from passing more of your courses, or which necessitated that you withdraw from classes.

Examples of possible situations include documented serious illness, severe injury, or death of a family member. If you do not have grounds for an appeal, or if your appeal is denied, you may still be able to regain your eligibility for future semesters. This is done by enrolling at Trine University at your own expense -- without financial assistance -- and negotiating a contract with the Office of Financial Aid, in advance, for the conditions under which eligibility may be restored.

### **If you wish to appeal, please submit the following:**

1. This appeal form completed and signed.
2. Detailed letter explaining the reasons for failure to meet SAP standards.
3. Documentation to support the reason for failure;
  - a. For example, if you or an immediate family member experienced a serious illness, injury or mental health condition, please attach a statement from your physician or mental health professional reflecting date(s) of occurrence/treatment. Or if you experienced the

death of an immediate family member, please attach a copy of the death certificate, obituary and/or statement from physician.

4. A copy of **Academic Improvement Plan**. Assistance making this plan can be found by meeting with your academic advisor or academic support services. Items to be included in your Academic Improvement Plan, but not limited to, are:
  - a. Your 4-year graduation plan
  - b. Academic Objectives
    - i. Remaining courses required to complete degree
    - ii. Anticipated semester class schedules for your remaining courses
    - iii. Grades you plan to earn in remaining courses needed to improve your GPA
  - c. Corrective Action Plan
    - i. List of any courses which you plan to repeat
    - ii. Academic Support Services or Tutoring you plan to use
    - iii. Utilization of the writing center
  - d. Further documentation that supports your plan

**Important Note:**

If you have attempted over 135 semester hours and have not yet completed your undergraduate degree requirements, you **MUST** also provide a statement from your academic advisor. It must include the month and date of your expected graduation along with the courses remaining and the semesters you will be taking them to complete your degree.

**The Office of Financial Aid Appeals Committee will review everything submitted. The Committee will send its decision within 10 working days to your Trine University e-mail address. If your request is incomplete it will not be reviewed. Please note that once a decision is made by the committee it is final. An approval does not guarantee that your entire aid package will be renewed.**

**STUDENT CERTIFICATION:** I certify that I have read the Satisfactory Academic Progress Policy and wish to request a review of my situation. I certify that all information and documentation I have submitted pertaining to this appeal is true. I understand that the decision of the Office of Financial Aid Appeals Committee is final.

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**Student Signature**

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**Date**

Please return to us a **minimum of one week prior to the start of any term:**

**Trine University  
Financial Aid Office  
1 University Ave  
Angola, IN 46703**

**Phone: 800-347-4878  
Fax: 260-665-4511**