

Student's Signature\_

## **Financial Aid Offices**

Lancaster, Salkehatchie, Sumter, Union

# **GRADUATION PLAN FORM**

## FINANCIAL AID SATISFACTORY ACADEMIC PROGRESS (FASAP)

Student's Name	VII	P'ID		
Current Program of Study		<b>Estimated Graduation Date</b>		
Prior Degree(s) Earned (and date earn	ned) and/or Previous Major(s) ( <i>ij</i>	f applicable)		
1	2		_	
Required items for appeal: Failure A completed appeal form.	to include these items will result i	n an automatic denial.		
<b>Typed Statement:</b> You must address all ter took to make an effort to meet your responsib improved. Provide a detailed explanation of the <b>Proof</b> that the event you describe occurred (note that the	ilities during the time of your mitigating factors which contributed to your la	ng circumstances and how your circk of academic progress.		
<ol> <li>Identify all degree requirements</li> <li>Map out all of the courses you r GPA required for admission to</li> <li>Submit your completed Gradua</li> </ol>	you believe there are omissions, sees you have not fulfilled including you have not fulfilled including you have to graduate in the order you playour major, consider those in your tion Plan to your faculty advisor approval, submit your plan to the F	e the campus Admissions Office our general education requirer an to take them. If there are control plan. For review and approval, inancial Aid Office.	ce. nents.	
Fall Semester: 20 Course (Subject Section) Hrs. C	Spring Semester: 20 Course (Subject Section) Hrs.	Summer Seme Course (Subject Section		
Fall Semester: 20Course (Subject Section) Hrs.	Spring Semester: 20 ourse (Subject Section) Hrs.	Summer Semo		
I, the academic advisor, hereby confirm the student still requires these courses to		quired for this student to comp	olete his/her degree and	
Advisor's Signature		Date		
I, the student, certify the information sub understand the completion of this appeal the final decision.	omitted is true and correct to the be	est of my knowledge. I have rea	ad the FA SAP Policy. I	

### Financial Aid Office Use Only

### **FASAP Appeal Committee Decision**

erm Current Ac	ademic Year	_ CUM GPA_	Hrs Attempted	Hrs Earned	
Appeal Considered Based on:  Seeking Second Undergraduate Degree Seeking Teacher Certification			Change of Major Other		
omplete: Y N	_(If no documen	it system. Returi	n with denial or reques	t additional information.)	
enied: YN	Reason for Denia	.1			
pproved with graduati	ion plan: Y N				
on plan criteria and/or	additional stipula	tions:			
FASAP Committee's Signature			Date		
ble 2nd Level Commi	ttee Review Resu	ılts:			
FASAP Committee's Signature			Date		
				FAO Initials	
	onsidered Based on: Seeking Second Seeking Teacher  omplete: Y N  enied: Y N  pproved with graduation plan criteria and/or  Committee's Signature  ble 2nd Level Commi	onsidered Based on:Seeking Second Undergraduate DSeeking Teacher Certification  omplete: Y N (If no document of the complete: Y N Reason for Denial of the proved with graduation plan: Y N on plan criteria and/or additional stipulation plan: Signature ble 2nd Level Committee Review Results and Level Resul	onsidered Based on:Seeking Second Undergraduate DegreeSeeking Teacher Certification omplete: YN(If no document system. Return enied: YN Reason for Denial pproved with graduation plan: YN on plan criteria and/or additional stipulations: ble 2nd Level Committee Review Results:	Seeking Second Undergraduate DegreeChange of MajorOther  Seeking Teacher CertificationOther  omplete: Y N (If no document system. Return with denial or requested in the system in the syste	