



Financial Aid SAP Appeal Application

2016-2017 AID YEAR

Student Name: _____ Student ID# _____

Which term are you appealing? You cannot appeal a term that has already ended. (Please check one)

Summer _____ Fall _____ Spring _____

I am submitting this appealing so I can continue to receive Financial Aid at UNT Health Science Center, and I certify that I am submitting a personal letter fully explaining both items below: (Initial Below)

____ Why I failed to meet SAP for my program of study (provide supporting documentation if applicable)

____ What has changed that will allow me to meet SAP

Your letter of explanation must fully explain the items above and will need to be longer than half a page.

(Approved SAP Appeals allow a student to receive financial aid for the current term only. Students not meeting SAP by the end of the term may lose all future financial aid eligibility.)

SAP Appeal Applications must be submitted by fax (817-735-0448), email (joseph.sanchez@unthsc.edu) with "FA SAP Appeal Letter" in Subject Line, or in person (Student Services Center, First Floor) to the Director of the Office of Financial Aid. Appeal will be reviewed within 5 to 10 business day from the date received.

By signing below, I understand that if the appeal is not approved, my financial aid will be denied for the current term and may be denied for future terms.

Student Signature _____ Date _____

Office Use Only

GPA = _____ Completion Rate= _____

Approved _____ = FA Probation _____ FA Academic Plan _____

Notes for Approval:

Denied _____