



Appeal of Termination of Federal Financial Aid Eligibility

1 of 2

Student's Name _____ SLU ID Number _____

APPEAL PROCESS

- A student has the right to appeal this termination of Federal Financial Aid eligibility.
- Supporting documentation is required for medical condition(s), family death(s), and other extenuating circumstances
- An appeal for federal aid will require an academic advisor signature on Page 2.
- Return this appeal and supporting documentation to the Office of Student Financial Services using the contact information at the end of this form.
- You will be contacted by e-mail to your SLU e-mail account regarding the decision of your appeal.

Section #1: Student Appeal Statement (regardless of appeal reason please initial by each checkmark)

- ✓ _____ **LIMIT 500 words.** Provide a clear and concise statement as to what caused the lack of minimum Academic Progress.
- ✓ _____ You may attach additional pages and/or documents. All information is **confidential** to the SFS office.
- ✓ _____ Documentation is required for medical condition(s) and family/friend death(s).
- ✓ _____ SLU Transcripts are not required. The committee is able to see all grades and any updates to major or classes.
- ✓ _____ Transcripts of grades from other universities/colleges are required.
- ✓ _____ All documents should include your name and Banner ID.

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Section #2: Student Academic Plan (regardless of appeal reason please initial by each checkmark)

- ✓ _____ Map out **specific** corrective actions you will take to meet/maintain minimum Academic Progress Standards (registration loads, grades, class completion, etc.)
- ✓ _____ Provide **measurable** credit hour, GPA, and course load commitments that outline a clear path to meeting Satisfactory Academic Progress standards
- ✓ _____ Meet with your academic advisor to **review, approve, and sign** the plan. The plan should be targeted and specific with the expectation of regaining SAP eligibility.

Anticipated Graduation Date: _____ semester _____ year

Where applicable, map out GPA, Credit Hour, and other Program-Specific Commitments in the fields below:

Semester of Study	GPA	Credit Hour/Completion %	Specific Commitments

Section #3: TWO Signatures required

Print Name Faculty Mentor/Academic Advisor Signature Date

Faculty Mentor or Academic Advisor's Signature

- ✓ Advisor's signature signifies that a written academic plan is approved and in place.

Student's Signature Date

NOTE: Signatures must be handwritten. Computer fonts not acceptable

UPON COMPLETION SUBMIT TO: Student Financial Services at the contact information below.

Saint Louis University
One Grand Boulevard
DuBourg Hall, Room 119
St. Louis, MO 63103
Email: finaidappeal@slu.edu