



EASTERN CONNECTICUT STATE UNIVERSITY

83 WINDHAM STREET • WILLIMANTIC, CONNECTICUT 06226 • 860-465-5000

Office of Financial Aid

21-22 Satisfactory Academic Progress (SAP) Appeal Application

Name:	Eastern ID:
Phone Number:	

Responses should be received by the end of add/drop of the corresponding academic term. Failure to submit by that time could impact the result.

Please explain the circumstances that contributed to your lack of Satisfactory Academic Progress. Attach any supporting documentation (letter from a doctor or counselor, medical documentation, obituary, etc.):

What has changed that will allow you to achieve Satisfactory Academic Progress during the next academic term?

Student Signature

Date

DO NOT WRITE BELOW THIS LINE:

	Requested:	Received:
<input type="checkbox"/> ADDIT INFO	_____	_____
<input type="checkbox"/> ACAD PLAN	_____	_____

<input type="checkbox"/> FALL	<input type="checkbox"/> SPRING
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED

GPA _____ % Earned (Incl Transfer) _____

Attempt (Incl Transfer) _____ Earned (Incl Transfer) _____