EAST TENNESSEE STATE UNIVERSITY

Financial Aid & Scholarships

Satisfactory Academic Progress Form – PACE & Maximum Time Frame

Name _____

ETSU ID Number E _____

ETSU email _____

Phone: _____

IMPORTANT: SAP appeals are reviewed by Committee according to the published Appeals Review Committee Schedule. All Appeal decisions will be sent to your ETSU email account.

DEADLINES

- Fall - appeals must be received prior to the last meeting of the Appeals Committee for the term as outlined in the Appeals Committee Schedule
- Spring - appeals must be received prior to the last meeting of the Appeals Committee for the term as outlined in the Appeals Committee Schedule
- Summer - appeals must be received prior to the last meeting of the Appeals Committee for the term as outlined in the Appeals Committee Schedule

If your SAP eligibility is approved in SAP probation status, all classes must be taken at ETSU for you to comply with the requirements of that status.

EXCLUSIONS (The following situations are NOT grounds for an appeal)

• **Past Due Account Balance**—An appeal is not a substitute for keeping a student account paid and current. A student is responsible for charges and payments to his/her account.

• **Non-attendance and/or Poor Academic Progress**—The appeal process is for those students who are academically engaged (attended and participated in classes until the time of the event). It is not intended for students in non-attendance, for those who have stopped attending due to personal reasons or change of academic plans, and/or for those with poor academic progress.

• **Situations that are Academic in Nature**—If the situation regarding your failure to meet the Standards of Academic Progress is directly related to coursework and/or instruction.

• **Non-Emergency or Preventative Medical Appointments/Procedures**—Routine exams, elective procedures, and preventative care not requiring extended absence or which could have been scheduled without impacting class attendance do not qualify (e.g., pregnancy does not qualify unless complications arose requiring extended absence). Cosmetic procedures do not qualify unless required due to a medical emergency; appropriate documentation indicating that the procedure was needed due to special medical circumstances is required.

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Instructions:

Attach all required information listed below to this coversheet, and submit it at the same time. **Incomplete petitions will be denied. Additionally, any forms requiring a signature must be signed with a physical, wet signature or signed with an official digital signature.**

Petition Requirements:

Your Personal Statements (Students cannot use artificial intelligence (AI) to generate a statement, nor can the statement be provided by someone else. Statements must be typed, dated, and **signed.**):

1. **Personal Statement of Extenuating Circumstances** - Provide concise, factual statements that describe extenuating circumstances, such as personal injury or illness, family emergency, death of a close relative (e.g. parent, sibling or grandparent), or other exceptional circumstances that occurred during specific individual semesters/terms of enrollment in which you did not successfully pass all classes. If you continually enrolled with an ongoing medical condition or personal circumstance, explain why you did not reduce your course load or stop attending to adjust to any personal limitations.

2. **Personal Statement of what has changed** - Explain what has changed in your situation, and the steps you have taken to ensure that you will successfully complete all current and future classes.

3. **Supporting Documentation** - Attach written documentation (no pictures) for both 1 and 2 above that is date specific and that clearly supports each extenuating circumstance described in your personal statement(s), and that documents changes and steps you have taken to ensure current and future success in your classes. Do not provide originals, or your only copy, as all information is imaged and the paper copy destroyed.

4. Academic Plan (pages 3 and 4 of this document) - Be sure the Academic Plan is complete and signed by you and your ETSU academic advisor. **Keep a copy of the plan for reference when registering for future terms because you must follow it exactly if your petition is approved.**

Examples of Acceptable Documentation:

- A signed, dated statement on professional letterhead from a doctor or other professional that confirms medical, legal, or other circumstances described in your personal statements, and that states whether these are resolved.
- A copy of a police report or court document that includes a date and information specific to what happened.
- A copy of a death certificate or funeral announcement that includes the date of death.

For Office Use Only

Appeal Decision Code: APGPA; APPACE; APMAX; APPGPA; DENIED

Tracking Code: APPLFA; APPLSP; APPLSU RHACOMM_____Date email sent

Comments/Appeal Restrictions _____

_____

Reviewed by_____Date _____

Submit forms to Buc Central in person at the D.P Culp Student Center, room 250, second floor; by fax at (423) 439-5855; or click here to submit documents via Dropbox.

Have questions? Email buccentral@etsu.edu or call 423-439-BUCS (2728)

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TO BE COMPLETED BY STUDENT

Your Major: (as listed in GoldLink) _____

I will follow this academic plan exactly as listed below. I understand that failure to register for these courses as listed may result in loss of my financial aid eligibility, and that changes to an academic plan require a new petition and academic plan with an explanation of the need to change the plan**. I understand that all classes must be taken at ETSU, and that I must pass all classes with no drops or incompletes.**

Student Signature _____

Date _____

TO BE COMPLETED BY ACADEMIC ADVISOR

Will the student graduate at the end of the current semester? Yes_____No _____

If yes, complete the current term section below, and then proceed to the signature section.

If no, complete this section for the current and up to two semesters, listing only courses that satisfy a degree requirement outlined in the catalog. **Current term courses must list actual classes in which the student is registered.**

Current Term

Prefix	Number	Course Title	Credit Hours

If the student has remaining electives, indicate the course level in the 'Number' column. e.g. 3XXX or 4XXX, and list the type of electives in the course title.

Term_____

Year _____

Prefix	Number	Course Title	Credit Hours

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Term_____

Year _____

Prefix	Number	Course Title	Credit Hours

Term_____

Year_____

Prefix	Number	Course Title	Credit Hours

If the student has coursework remaining, please list below only those courses that satisfy a degree requirement outlined in the catalog. If these courses are electives, indicate the level in the "Number" column. For example, an upper level elective could appear as 3XXX or 4XXX.

Prefix	Number	Course Title	Credit Hours

Advisor's Comments:

I certify that the information provided is true and complete.

_____

Academic Advisor Printed Name

_____ _____

Academic Advisor Signature Date