Satisfactory Academic Progress Appeal of Financial Aid Suspension

Semester: ______________________

Name: _______________________________  GT ID: _______________________________

Email: _______________________________  Phone Number: _________________________

As a condition of receiving financial assistance from Georgia Tech, I understand that I am required to meet the standards of Satisfactory Academic Progress for financial aid recipients. I understand that I may appeal a suspension from financial aid eligibility if there are extenuating circumstances. By submitting this petition, I authorize the review of my academic records and financial aid awards, including any prior appeal actions, by members of the Financial Aid Appeal Committee.

Section I: Student Statement of Appeal
Specify the reason(s) why the minimum Standards of Satisfactory Academic Progress requirements were not met. Attach additional pages if necessary.

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________________________________________________________________________

Section II: Achieving Satisfactory Academic Progress
Specify the steps that you have/will take toward achieving Satisfactory Academic Progress.

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________________________________________________________________________

________________________________________________________________________

*Please allow up to 10 business days for processing.

Student Signature ______________________ Date ______________________

For Office Use Only:

Total Hrs Attempted: __________

Current GPA: __________  Required GPA: __________

Hrs Req. for Degree: __________

Approved: __________  Denied: __________

150%: __________

Reviewed by: __________

2nd Reviewer Decision/Signature: ______________________ Date: ______________________