

2026-2027 Financial Aid Satisfactory Academic Progress (SAP) Appeal Form

Student Name: _____

Student ID: _____

Students placed on financial aid suspension for not meeting the Satisfactory Academic Progress (SAP) Standards may appeal the suspension based on extenuating circumstances. Please review the Satisfactory Academic Progress (SAP) Policy at www.ucdenver.edu/finaid/policies.

Complete all steps outlined on this form to appeal your financial aid ineligibility. Please review the appeal requirements section to ensure all required documents are included. Appeals that are missing required documents may be denied.

To be considered for the reinstatement of grants other than the Federal Pell Grant, the Financial Aid & Scholarships Office must receive a complete appeal no later than 1 month after the Census Date for the term for which a student is appealing and still enrolled. The Financial Aid & Scholarships Office will consider a student for loans if a complete SAP Appeal is received no later than 30 days prior to the last day of the term for which a student is appealing and still enrolled at least half-time. To learn more, review the appeals deadline section of the SAP Policy.

Please check the semester for which you are submitting an appeal to have your aid eligibility reinstated.

1) Semester: ☐ Fall 2026 ☐ Spring 2027 ☐ Summer 2027

2) Reason for Financial Aid Suspension (Initial all that apply)

☐ I currently have a cumulative grade point average (GPA) below the minimum standard of 2.0 for undergraduate students or 3.0 for graduate students (some exceptions apply, see SAP policy for more details). My current cumulative GPA is _____.

☐ I currently have a completion rate below the required 67%. My current completion rate is _____.

☐ The credit hours I have attempted exceed 150% of the published length of my program(s). I have submitted a completed and signed Financial Aid Satisfactory Academic Progress Plan and have completed section B of the plan with my Academic Advisor.

3) Appeal Requirements:

- Provide a typed and signed statement explaining the extenuating circumstances that prevented you from meeting the Satisfactory Academic Progress (SAP) standards and explain what has changed in your situation to allow you to succeed in the future. You must explain:
 - The extenuating circumstance(s) was that caused you to be unable to meet the SAP standards;
 - When the circumstance(s) occurred and how long the circumstance(s) lasted;
 - How it affected your academic performance; and
 - What corrective measures have you taken or will take to achieve and make satisfactory academic progress now and in the future.
- Submit documentation that supports your circumstances (e.g., birth/death certificates, obituaries, accident report, insurance claim, and medical and/or court documents).
- You may also be required to create an Academic Progress Plan for the length of time it will take you to meet the minimum SAP thresholds or until you graduate. Please note, if you are on suspension for exceeding 150% of the published length of your program(s), an Academic Progress Plan is required.
- Submit this form, your typed and signed statement, and all supporting documentation to the Financial Aid & Scholarships Office.

Upload completed forms to www.ucdenver.edu/fadocs

Denver: Student Commons Building 5105 | PO Box 173364 | Campus Box 125 | Denver, CO 80217 | 303.315.5969 | Financialaid@ucdenver.edu
Anschutz Medical Campus: Education 2 North | 13120 E. 19th Ave | Box A088 | Aurora, CO 80045 | 303.724.8039 | Financial.Aid@ucdenver.edu



Checklist of Completion: (Initial each completed item)

☐

I have read and understand the Satisfactory Academic Progress (SAP) Policy. To review the SAP policy, visit www.ucdenver.edu/finaid/policies.

☐

I have completed the appeal form and all questions have been answered.

☐

I have provided a typed and signed statement explaining the extenuating circumstances that prevented me from meeting the (SAP) standards.

☐

My typed explanation also explains what has changed in my situation to allow me to succeed now and in the future.

☐

Documentation to support my appeal has been attached.

By signing below I certify I agree to and understand the following:

The information I have provided is true and complete to the best of my knowledge. I realize additional information may be requested by the Financial Aid & Scholarships Office to further support my appeal.

When a final decision has been made regarding my appeal for financial aid eligibility, I will be sent a notification via my university email.

If I am unable to meet SAP standards in one semester or I have exceeded the allowable maximum timeframe, I must submit an Academic Plan. If my appeal is approved under an Academic Plan, I must meet the terms of that plan for every semester on the plan in order to remain eligible for financial aid. If I violate the conditions of the plan I will be placed back on Financial Aid Suspension.

If I am granted an appeal approval, I will be placed on financial aid probation status and must meet the SAP standards at the end of the term for which I am approved or meet the standards outlined in my Academic Plan. If I fail to meet the requirements, my eligibility for financial aid will be suspended.

If my appeal is not approved I am not eligible for financial aid funds and responsible for all charges on my student account.

Student Signature (required)

Date

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