University of St. Thomas - Houston

Satisfactory Academic Progress (SAP) Appeal Application 2012-2013

Last Name	First Name	Middle Initial	UST ID#

All sections must be completed before submitting the SAP Appeal Application to the Office of Scholarships and Financial Aid located in Herzstein Enrollment Center. Incomplete SAP Appeal Applications will not be considered. Please print legibly.

SECTION I: Statement of Academic Integrity

Student Responsibility: You are responsible for knowing and abiding by all guidelines, deadlines, scholarly requirements, and Federal requirements which can be viewed online at www.stthom.edu. Lack of knowledge is not a valid excuse for failing to follow the Federal guidelines. If you have questions regarding the requirements, it is your obligation to clarify the meaning before the failure to abide becomes an issue in evaluation of your appeal.

Statement of Academic Integrity: Ethical conduct is essential to a community of scholars and students searching for the truth. Anything less than a total commitment to honesty and honorable conduct undermines the efforts of the entire community. Academic integrity lies at the very heart of any institution of higher learning. At the University of St. Thomas, students and faculty are expected to commit to a code that exemplifies each individual's honor and integrity. Any conduct that violates this standard and betrays the respect of others is a matter of grave concern and is unacceptable.

Statement of Scholarship: Scholarly work is essential to uphold the value of education provided by the University of St. Thomas, as well as the currency of all degrees conferred within the greater educational, professional and world community. Anything less than a total commitment to preparation, attentiveness, active intelligence, reasonableness, and responsibility for producing the highest quality college work undermines the efforts of the entire community. It is the student's responsibility to seek out academic and personal support when crisis occurs.

Statement of Understanding: The SAP Appeal Application I have submitted represents my best efforts to commit to UST goals of Higher Education. I understand that the Satisfactory Academic Progress Appeals Committee's decision is final and re-appeals will not be accepted for the 2012-2013 academic year. The SAP Appeals Committee's decision may stipulate conditions and restrictions, if not followed explicitly; I understand that I forfeit my financial aid eligibility for 2012-2013.

Statement of Release: I am requesting that the SAP Appeals application and supporting documentation I have submitted, be reviewed for consideration by the SAP Appeals Committee members.

I hereby authorize the Satisfactory Academic Progress Appeals Coordinator and Committee to discuss and obtain any documentation related to my academic performance, my character, my potential for success in the endeavor for which he/ she is recommending me, and any other professional or academic information he/she considers relevant. I also waive my right under the Family Educational Rights and Privacy Act (FERPA) to see the letter, making it confidential between the individual contacted and the Satisfactory Academic Progress Appeals Committee.

I understand that I will be notified of the committee's decision by email via my university email account. Any fees I may owe the university are due on the date specified regardless of the status of my appeal.

Student Signature _____ Date _____

According to the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1845-0041. The time required to complete this information is estimated to average twelve minutes, including the time to review instructions, search existing data resources, gather the data needed and complete and review the information collected.

Date:

UST ID#:

Name:

SECTION II: Appeal Details

Please answer the following questions as completely as possible and return the form to the Office of Scholarships and Financial Aid. Please contact the Office of Scholarships & Financial Aid for appeal deadline information. Please type or print legibly. Attach additional pages if needed.

Is this your first time to file a SAP appeal? **YES** ☐ **NO** ☐

If no, please indicate which semester(s) you submitted an appeal.

_____

Please select the situational factors contributing to your lack of academic progress most applicable to you:

Occupational situation ☐ Current family obligations ☐

Unexpected life event ☐ Current health crisis or unexpected illness ☐

Other (Explain) ☐ _____

Please explain how these factors have affected your academic performance. You may attach a statement if you prefer.

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Outline the specific steps you are taking to ensure future success in attaining your academic goals. If appropriate, emphasize what will be different in your situation to ensure success.

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SECTION III: Required Supporting Documentation

Please provide **ONE** of the following forms of additional support that would directly relate to your appeal.

o	Letter of recommendation from your assigned Academic Advisor
o	Academic Advisor Certification Form (attached form is optional)
o	Letter of recommendation from a UST Faculty member
o	Letter of recommendation from UST's Tutorial Services
o	Letter of recommendation from UST's Counseling & Disability Services
o	Letter of recommendation from your Spiritual Advisor
o	Letter of recommendation from your Physician
o	Letter of recommendation from your Employer
o	A journal or receipt of tutorial services

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Satisfactory Academic Progress (SAP) Appeal
Academic Advisor Certification Form
2012-2013

Last Name	First Name	Middle Initial	Student UST ID#

Academic Advisor Certification for SAP Appeal - OPTIONAL
(To be completed by assigned Academic Advisor)

If successfully completed, will the plan of study meet the degree requirements? YES ☐ NO ☐

Is this plan reasonable in terms of semester hours, student's ability, and class difficulty? YES ☐ NO ☐

As the student's Academic Advisor, your personal statement regarding the applicant's academic ability is highly valued. Please feel free to email your recommendations and opinions for the Satisfactory Academic Progress Appeals Committee to Dean Lynda McKendree at mckendla@stthom.edu. Your statement will remain confidential and shared only with committee members.

Question	Yes	No
Has the student ever come in to talk to you about academic progress?		
Discussed degree requirements pertaining to the student's major?		
Discussed or developed a plan to improve academic success?		
Reviewed and made adjustments as appropriate to the student's schedule?		
Would you like to discuss the progress/plan? (If yes, OSFA will contact you.)		

Academic Advisor's Printed Name	Department	Extension

Academic Advisor's Signature	Date

Comments:

Please mail or fax (713.525.2142) this completed form to the Office of Scholarships and Financial Aid.

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