

**Scholarship Appeal and  
Financial Aid Satisfactory Academic Progress Appeal**

**2022-2023**



Student _____	ID Number _____	Phone # _____
Email (all appeal results and correspondence will be sent via UST email): _____		
Filing Appeal for: <input type="checkbox"/> Fall 2022 <input type="checkbox"/> Spring 2023      Classification: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior		
Major _____ Minor, if applicable _____		
Number of credits for next semester _____ Cumulative GPA _____ Last Semester GPA _____		

**For Scholarship Appeal Check One**

**For Financial Aid Appeal Check One**

**Reason to Appeal :**

- Academic Difficulties: Less than required GPA for scholarship
- Reduction of Credit Hour Requirement to below 12 hours
- Credit Hour: Did not complete 24 hrs per year or 12 hrs per term
- Request for Additional Semester beyond standard 8 terms

**Reason to Appeal:**

- GPA: Academic Performance
- Course Completion Less than 75%
- Time Frame Exceeded

**All appeals must include supporting documents:**

1. Appeals must have a typed, signed letter from yourself, answering the following questions as completely as possible, or describing your request:

- **Please list and describe in detail what circumstance(s) contributed or will contribute to your inability to meet the regular requirements of your scholarship and financial aid.**
- **Please list all other responsibilities you have while you attend school (i.e. work, family, etc.).**
- **What changes have you made or will make to help you succeed at UST?**

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

- **Letter of recommendation from your assigned Academic Advisor, UST Faculty member, UST's Counseling and Disabilities Center, Spiritual Advisor, Employer, or Physician**

3. Submit a completed degree program worksheet:

- **You may get this from your Academic Advisor or Office of Academic Advising**

## STATEMENT OF ACADEMIC INTEGRITY

**Student Responsibility:** You are responsible for knowing and abiding by all Scholarship, Federal and State guidelines, deadlines, and scholarly requirements for each of the programs. Lack of knowledge is not a valid excuse for failing to follow the guidelines of the programs. 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 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 Scholarship and SAP Appeal application I have submitted represents my best efforts to commit to UST goals of Higher Education. I understand that the Appeals Committee's decision is final and re-appeals will not be accepted for the academic year in which I am applying. The Appeals Committee decision may stipulate conditions and restrictions that if not followed explicitly may affect my financial aid and scholarship eligibility.

**Statement of Release:** I am requesting the Appeals Committee members review the Scholarship and SAP Appeal application and supporting documentation I have submitted for consideration. I hereby authorize the 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 Appeals Committee.

Submit your letter along with this form, and any supporting documentation to the Office of Scholarships and Financial Aid in a timely manner.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**COMMITTEE USE ONLY:**

Approved

Denied

Date: \_\_\_\_\_

Scholarship and amount: \_\_\_\_\_

Required GPA: \_\_\_\_\_ Hours Completed for prior Fall: \_\_\_\_\_ Spring: \_\_\_\_\_ Summer: \_\_\_\_\_

Recommendations: \_\_\_\_\_

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