

# Satisfactory Academic Progress (SAP) Appeal

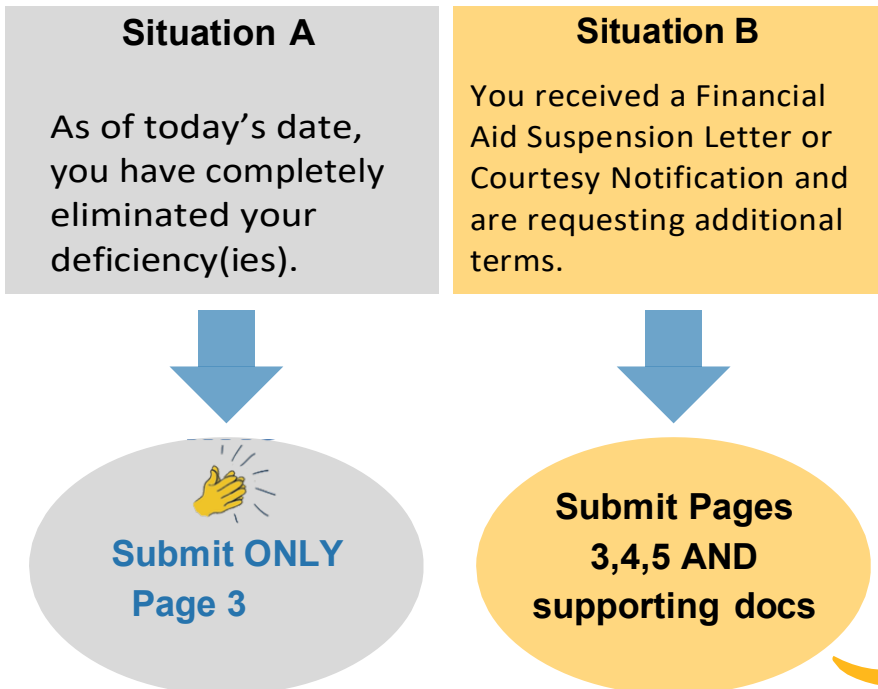
Students who have their financial aid suspended may submit a written appeal using the Satisfactory Academic Progress Appeal form. When filing an appeal, make sure that you provide a full explanation along with documentation, verifying the circumstances that led to your inability to meet the Standards for Satisfactory Academic Progress. Before filing an appeal, it is important that you seek assistance from your school or college advisor in order to explore ways of eliminating your deficiencies and to establish a realistic plan towards graduation.

## SAP Appeal Options

If you received a Financial Aid Suspension Letter or Courtesy Notification, you have an opportunity to appeal this decision.

**If multiple deficiencies please submit only one SAP appeal.**

Determine the situation that applies to you below and complete the following steps:



## PRIORITY DEADLINES

**MAY 30, 2025** | Summer\*

\*Make sure to fill out a summer application via [my.ucla.edu](http://my.ucla.edu) under Finances and Jobs.

**JULY 18, 2025** | Academic Year





Appeals submitted after the priority due dates, if approved, may be considered for federal aid only.

Resource: [SAP Guide](#)

### Optional item:

Attend a SAP Workshop.  
(dates, times, and location to be announced via email)

## Checklist

-  Student form (pg. 3 and 4)
-  Supporting documentation
-  Academic plan (pg. 5) signed by an academic advisor
-  Refer to page 3 for submission instructions

# Completing Your SAP Appeal



If you received a Financial Aid Suspension Letter or Courtesy Notification and are requesting additional terms, you have an opportunity to appeal this decision. Carefully read and follow the instructions below:

**1.** Complete pages 3-5 of this form. Attach a letter of appeal if more space is needed on page 4.

This letter should include and describe the following points:

- a. Explanation of the extenuating circumstances that impacted your ability to meet the minimum Satisfactory Academic Progress (SAP) Standards. Include the term(s) these extenuating circumstances occurred.
- b. Plan of action indicating how you have addressed or will resolve the issue(s) which resulted in your inability to meet the Satisfactory Academic requirements.

**2.** Provide copies of supporting documentation (e.g. doctor's letter/ bill, death certificate, obituary, police report, or external transcripts)

**3.** Submit an Academic Plan\* (page 5) This must include your expected graduation date, the courses and number of units you plan to complete each quarter and your College.

\*You must schedule an appointment with an academic advisor and have them complete page 5 of this packet.\*

*The information you share in your appeal will be kept private, but not confidential. In some instances, we may be required to report incidents you disclose in your appeal to confidential sources on campus which may include the Dean of Students, CAPS, and/or University of California Police Department.*

*The following academic advising departments are prepared to help you with the development of your academic plan.*

*Graduate students should seek academic counseling from an appropriate departmental representative.*

**Resource:** [SAP Guide](#)

## **Letters & Science Counseling**

### **College Academic Counseling**

A316 Murphy Hall  
(310) 825-3382

### **Academic Advancement Programs**

1205 Campbell Hall  
(310) 825-1481

### **Honors Programs**

A311 Murphy Hall  
(310) 825-1553

### **School of Engineering**

6426 Boelter Hall  
(310) 825-9580

### **School of the Arts and Architecture**

2200 Broad Art Center  
(310) 206-3564

### **School of Nursing**

2-137 Factor Building  
(310)825-7181

### **School of Theater, Film and Television**

103 East Melnitz Hall  
(310)206-8441

# Satisfactory Academic Progress Appeal (Student – Part I)



Financial Aid and Scholarships A129 Murphy Hall, Box 951435 Los Angeles, CA 90095	<b>2025 – 2026</b>  Office use only:
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Check this box if you believe as of today's date, you have completely eliminated your deficiency(ies).

<input type="checkbox"/> Check this box if you will be enrolled at UCLA for Summer 2025.	<input type="checkbox"/> Check this box if you have missed <u>two</u> or more consecutive terms
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Last name	First name	Student ID#	Telephone #
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E-mail Address	Term being appealed
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Please select academic level:

Undergraduate
  Graduate

**Certification**

My signature below acknowledges the following statements:

- The information in this form and in any attachments is complete and accurate.
- Appeals will be reviewed in the order received.
- If your appeal is submitted on time, you will be notified electronically of our decision before the start of the quarter for which additional aid is requested.

Student Signature	Date
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Office Use Only:

## HOW TO SUBMIT

- |   |  |
|---|--|
| <ol style="list-style-type: none"> <li>1. Log onto MyUCLA</li> <li>2. Click "Finances and Jobs" tab</li> <li>3. Under Financial Aid and Scholarships, click "Bruin Financial Aid Portal"</li> </ol> | <ol style="list-style-type: none"> <li>5. Click on "upload a non requested document"</li> <li>6. Select Document Name "Appeal:SAP Appeals Request" and attach the appeal form along with any supporting documentation required.</li> </ol> |
|---|--|



**(Student – Part II)**

Please attach a separate sheet if more space is needed

1. Why were you unable to meet Satisfactory Academic Progress (SAP)? Please explain the extenuating circumstances that prevented you from meeting the SAP requirements. Include the terms these circumstances occurred.

[Empty text box for answer to question 1]

2. What has changed in your situation and what is your plan of action that will allow you to meet SAP in the future?

[Empty text box for answer to question 2]

3. What supporting documentation are you including with this appeal?

[Empty text box for answer to question 3]

**Student Certification**

Please carefully read each item.

I understand if my appeal is approved, I will be on financial aid probation.

I understand if my appeal is approved, I must be meeting the requirements of SAP at the end of my quarter on probation, or be making upward progression in my GPA/Pace.

I understand that in order to be making SAP I must be meeting the following standards:

- I must maintain a cumulative GPA of at least 2.0 (undergrad) or 3.0 (grad).
- I must maintain a pace of completion (credits earned/credits attempted) of at least 67%.
- I must complete my academic program within the maximum timeframe, which is 150% of the published length of my primary degree program.

I understand that failure to comply with the above terms could result in the loss of financial aid. I certify that all information provided in this appeal, including any attachments, is complete and accurate.

**Section 3: Signature (electronic signatures accepted)**

Student's Signature:

Date:

# Satisfactory Academic Progress Appeal

*(Academic Advisor to fill out this page)*



**DO NOT SUBMIT AN ACADEMIC PLAN IF APPEALING A SUSPENSION DUE TO GPA ONLY.**

**2025 – 2026**

Financial Aid and Scholarships  
A129 Murphy Hall, Box 951435  
Los Angeles, CA 90095

**For Office Use Only:**

Name: \_\_\_\_\_

Last

First

Student ID#

Term

**You should only list, and register for, courses that can satisfy degree requirements (including GE's).**

	Units	*R/NR

	Units	*R/NR

	Units	*R/NR

	Units	*R/NR

**To be completed by Academic Advisor:**

**\*Required/Not Required**

1. Please fill the above grid with courses and correlating units. If these are not known (i.e. GE courses), fill in the course type and expected units to complete. Full time enrollment is not required as long as the student can complete their degree objective within the maximum timeframe allowed. Grant aid will be reduced for less than full-time attendance.
2. Indicate if courses listed above are "required" or "not required" towards degree objective.
3. Will the student enroll in the Reduced Fee Program? (If YES, circle all that apply) SUM'25 FA'25 WIN'26 SP'26  
Expected term that student will fulfill ALL degree requirements:

ADVISOR'S PRINTED NAME: \_\_\_\_\_

ADVISOR'S SIGNATURE: \_\_\_\_\_ EXT# \_\_\_\_\_ DATE COMPLETED: \_\_\_\_\_