Student's Name (Last, First, M.I.) ___________________________ Student ID Number ______________________

The student listed above filed an appeal with Mercer County Community College’s Financial Aid Office regarding his or her satisfactory academic progress status. After the appeal is approved, this Academic Plan must be completed and signed by both an academic advisor/counselor and the student before an award is posted.

Student’s current major and degree objective__________________________________________________________

Anticipated graduation date___________________ Number of Credits this term: _________________________

Anticipated date for meeting SAP standards __________________________________________________________

Advisor’s/Counselor’s information: Encourage the student to be realistic when planning as they will be expected to meet the enrollment goals set for every academic term. Although not required, most students should not be allowed to enroll full-time during the first two academic terms of their appeal.

If necessary, please attach comments regarding your knowledge of any special circumstances affecting the student’s academic progress. Include any recommendations regarding this student’s progress. (i.e., Advisement Record Form, optional).

By signing below, you are certifying that the student’s appeal is valid, their Academic Plan is realistic, and you are recommending that the Financial Aid Committee consider this plan.

Academic Advisor’s/Counselor’s Signature  Academic Advisor’s/Counselor’s Name (please print)  Date

By signing below you agree to comply with completing all of your 2014-15 courses with no failures “F”, withdrawals “W”, incomplete “I” or no credit “NC” grades of any kind and earn a term GPA of 2.00. You have also read and understood the information in the Satisfactory Academic Progress Policy and what has been reviewed in the Financial Aid Satisfactory Academic Progress Appeal Agreement.

FINANCIAL AID OFFICE USE ONLY

Committee Member  Recommendation  Date of review

Student Signature  Student Name (please print)  Date