

MAINE MARITIME ACADEMY

SATISFACTORY ACADEMIC PROGRESS (SAP) APPEAL FORM

To receive financial aid, all new, transfer, continuing and returning students must demonstrate they are successfully working toward completing their degree program in a timely manner. Maine Maritime Academy is required by the federal government to evaluate whether you meet the Satisfactory Academic Progress (SAP) requirements to receive financial aid. We understand that sometimes there are things out of your control that negatively affect your ability to meet SAP requirements. If there were justifiable reasons or extenuating circumstances that made you unable to meet the GPA and completion requirements noted below, you may submit an SAP appeal (with supporting documentation) to the financial aid office to regain financial aid eligibility. Appeal applications must be received by the start of the academic year.

Student's Information:

Name: _____ Date of Birth: _____ Student ID #: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Current Major: _____ Grade Level: _____ Cumulative GPA: _____

Which semester are you submitting an appeal? Fall Spring Year: _____

Please indicate the policy for which you are seeking an exception:

67% Aggregate Completion Rate

Cumulative GPA

Maximum Time Frame

Section 1: Application Checklist

A personal statement explaining why I was unable to meet Federal SAP and why I believe I can meet the requirements in the future.

Documentation from third parties (i.e. medical records, legal documents, death certificate, etc.) which supports my appeal. (This documentation cannot be from a family member or friend.)

Meet with and/or contact the Registrar's office to develop an Academic Success Plan (see section 4).

Office of Financial Aid | (207) 326-2339 | 1 Pleasant St | Quick Hall | financialaid@mma.edu

Castine, Maine 04420

mainemaritime.edu

Section 2: Explanation of Circumstances

Please provide a detailed explanation of the extenuating circumstances that prevented you from maintaining satisfactory academic progress.

Section 3: Plan for Academic Success

Work with the Registrar's office to outline the steps you will take to ensure satisfactory academic progress moving forward. Explain how your situation has changed, or how you will address the circumstances described to make sure you are academically successful and maintain satisfactory academic progress into the future.

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Section 4: Evaluation of Academic Performance

Meet with the registrar's office to complete the following items:

Current Major: _____

Projected Graduation Date: _____ / _____ (mm/yy)

The total number of credits your current program requires for graduation	
The total number of earned credits that apply toward graduation requirements in your current program	-
The total number of required credits you still must complete for graduation from your current program. (Including credits scheduled for current semester. This cannot be a negative amount).	

Registrar Certification:

I have met with the student mentioned above regarding the remaining credits needed for graduation from their current program of study. Additionally, I helped them develop a plan for academic success, detailed in section three.

Registrar Signature: _____ Date: _____

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Section 5: Reason for Appeal

Special Circumstance	Recommended Documentation
Severe illness, medical condition, or injury	<input type="checkbox"/> Signed and dated letter from physician on office letterhead verifying medical problems experienced and treatment received.
Divorce or Separation	<input type="checkbox"/> Divorce decree, legal separation documents, or a letter from an attorney stating marital status of parties involved.
Death of a Family Member	<input type="checkbox"/> Copy of the death certificate.
Traumatic life-altering event	<input type="checkbox"/> Evidence of an event such as an insurance claim or FEMA application.
Other circumstances (Please clearly state the circumstance if not listed above: _____ _____	<input type="checkbox"/> Appropriate documentation which will verify the situation

Section 6: Student Certification

I understand the submission of this form does not constitute an approval of my appeal. I will be notified of the committee's decision by email at the address provided. I certify that the information contained in this SAP form, supporting documentation, and statements, are accurate and complete to the best of my knowledge. (Please initial.)

_____ I understand that if it is mathematically impossible for me to meet the minimum academic standards within the allowable timeframe my appeal will be denied.

_____ I understand that if my appeal is approved, my aid will be conditionally reinstated, and my progress carefully monitored.

Student Signature: _____ Date: _____

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