

STUDENT AID LAMAR UNIVERSITY Return To: Office of Student Aid Office: Wimberly Building Room 200 Mill D.O. Bay 10012 Boyment TV

Mail: P.O. Box 10042, Beaumont, TX 77710 or Upload documents by logging into your Self Service

Revised 4/26/23

Maximum Time Frame Appeal Application



Student Name

LU ID ____

Term	Final Deadline:	
Fall	November 20th	
Spring	April 20th	
Summer	July 20th	

Your financial aid is currently suspended because you are not meeting one or more of the Satisfactory Academic Progress standards. To view your current Academic Progress status: log in to Self Service Banner \rightarrow Click Financial Aid \rightarrow Click Eligibility \rightarrow Click Academic Progress.

You may appeal the suspension of your financial aid if one of the following occurred preventing you from meeting Satisfactory Academic Progress (SAP) standards.

- Dual/ Double Major
- Change of Major
- Other (This includes, but is not limited to death, illness, a natural disaster, or a pandemic)

Appeals may take up to 3 weeks for review. You are encouraged to submit your appeal as soon as possible, but no later than the deadline listed above to guarantee review. If the appeal deadline falls on a weekend or holiday, you should submit no later than the following business day. You are responsible for meeting any payment deadlines while waiting on the decision of your appeal. Please do not miss class while waiting on a decision.

Step 1 (REQUIRED): Type in the box below, explaining what specifically happened that prevented you from meeting the required SAP standard. If you need more space, attach an additional statement with this form.

Step 2 (REQUIRED): Type in the box below, explaining what has changed that will allow you to make satisfactory progress at your next evaluation. If you need more space, attach an additional statement with this form.

Step 3 (OPTIONAL): Submit additional documentation supporting the reason(s) given for failing to meet SAP standards (i.e.: letter from physician, counselor, therapist, academic advisor, hospital documentation, etc.). To submit these documents, upload via Self-Service Banner, mail, or drop them off in person to the Office of Student Aid for review.

Step 4 (REQUIRED): Have your Academic Advisor complete page 3 of this worksheet listing your remaining coursework.

Step 5 (REQUIRED)Student Certification and Signature: By signing below, I certify that the information contained in my appeal is true. <u>I UNDERSTAND THAT I REQUIRED TO COMPLETE STEPS 1,2,4 AND 5 AND FAILURE TO COMPLETE THESE STEPS WHEN SUBMITTING MY APPLICATION WILL RESULT IN THE AUTOMATIC DENIAL OF MY APPEAL.</u> I certify that I have read the Satisfactory Academic Progress Policy at <u>https://www.lamar.edu/financial-aid/resources/academic-standards.html</u> and understand that if my appeal is approved, I will be placed on an academic plan for the semester. I agree to meet the conditions of my academic plan until my plan either changes or I am meeting overall SAP standards. I understand that failing to meet the conditions of the academic plan at the end of the semester will result in the denial of my financial aid in the subsequent term(s) and I will not be allowed to reappeal. If my appeal is denied, I understand that I may request to have my appeal reviewed by the Financial Aid Appeal Committee by submitting a request to financialaid@lamar.edu.

Student Signature _____

Date _____

Once your appeal is reviewed, you will be notified of the appeal decision via email, and your Academic Progress. If you appeal is approved, you will be emailed an Academic Plan Agreement. Your financial aid will not disburse until your signed Academic Plan Agreement has been received by our office.



Student Name_____

LUID

Certification of Remaining Coursework Required for Degree Completion

Your academic advisor must fill out the following degree plan of courses that are LEFT for you to complete. Be advised, if your appeal is approved, only the courses listed on this plan will be funded. Any other courses (i.e. leveling courses, courses taken to improve GPA, courses taken for personal gain) will not be funded and you will violate the appeal conditions resulting in the denial of your financial aid. If more courses are needed than the allotted space below, you may also submit a degree audit plan signed by your advisor that clearly lists the remaining coursework.

MAJOR:_____ EXPECTED GRADUATION TERM:_____ Course # and Name Course # and Name 1. 13. 2. 14. 15. 3. 4. 16. 5. 17. 18. 6. 7. 19. 8. 20. 9. 21. 22. 10. 11. 23. 12. 24.

Academic Advisor Certification and Signature

By signing below, I certify that the information provided on this form is accurate to the best of my knowledge and that the student referenced above is required to complete the courses listed on this form for completion of his/her degree program. I understand that the courses listed must be in the student's degree audit as a required course for the student to be eligible to receive financial aid.

Advisors Name:	Date of completion:
Advisor Signature:	Office Phone: