

# Satisfactory Academic Progress Duration of Eligibility – 150%

Marshalltown Community College  
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This appeal is for undergraduates who have exceeded the duration of eligibility limits of the Standards of Academic Progress (SAP) or are returning to earn a second degree or certification. Complete all sections of the appeal according to the instructions given. Incomplete appeals will be returned. Completed forms will be reviewed by the SAP Committee and notification of the outcome will be sent to the student's email address provided on the appeal form.

The U.S. Department of Education has established Financial Aid Standards for Satisfactory Progress to encourage students to successfully complete academic coursework and progress satisfactorily toward program completion. Pursuant to federal regulations, students denied financial aid due to unsatisfactory progress may use this form to appeal for reconsideration of financial aid eligibility, if there are mitigating or unusual (crisis) circumstances.

## **Important Deadlines**

Appeal forms will be accepted according to the following schedule. Appeals received after this date, will be reviewed for the following semester

<b>Semester</b>	<b>Completed Appeal Packet and Success Plan Due</b>
Fall Semester	August 1
Spring Semester	First Friday of January
Summer Semester	Friday before classes start

Birthdate \_\_\_\_\_ MCC Student ID \_\_\_\_\_

Name \_\_\_\_\_  
Last – First – Maiden

Address \_\_\_\_\_  
Box/Street – City – State – Zip Code

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**I am completing this appeal form so that I may be reconsidered for financial aid for the semester beginning:**

Term \_\_\_\_\_ Year \_\_\_\_\_

## **Section 1 – Advisor Certification**

The SAP Committee requests the assistance from an academic advisor in assessing the viability of outlined plan of study. In your assessment:

Will the plan of study, if successfully completed, meet the degree requirements?  Yes  No

Is this plan reasonable in terms of semester hours and class difficulty?  Yes  No

Comments/Qualifying Statements

Signature of Academic Advisor \_\_\_\_\_

Date \_\_\_\_\_

### Section 2 – Plan of Study

Current Cumulative Credit Hours Earned \_\_\_\_\_ Current Cumulative GPA \_\_\_\_\_

Fill out the table below showing what courses you plan to take the next three semesters:

Term:	Term:	Term:
Semester Credits Earned:	Semester Credits Earned:	Semester Credits Earned:
Semester GPA:	Semester GPA:	Semester GPA:

**I agree to comply with the above agreement. I understand that failure to comply with any part of this agreement will be used in future decisions regarding my financial aid and academic eligibility at Marshalltown Community College.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Return this Appeal Form and all supporting documents to the MCC Financial Aid Office.**

January 2021